

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A2W

☐ Check if different than previously reported. (ACC)

Northbrook

IL

60062

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00040253

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
06 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer

Mario Rizzo

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 17 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
06		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2014</div></div>		<div><div></div><div>18587.52</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>56961.39</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>20187.14</div></div>	<div><div></div><div>135036.23</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>77148.53</div></div>	<div><div></div><div>153623.75</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>14806.61</div></div>	<div><div></div><div>91281.83</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>62341.92</div></div>	<div><div></div><div>62341.92</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Allstate Insurance Company PAC**

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2014

To:

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

18925.85

82179.63

(ii) Unitemized .....

1261.29

52856.60

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

20187.14

135036.23

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

20187.14

135036.23

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20187.14

135036.23

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

20187.14

135036.23

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	106.61	691.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	106.61	691.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12750.00	80500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	1950.00	10090.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14806.61	91281.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14806.61	91281.83

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20187.14	135036.23
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20187.14	135036.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	106.61	691.83
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	106.61	691.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 174  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. REBECCA A ABEL**

Mailing Address 657 CORAL COURT

City State Zip Code  
 LINDENHURST IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Service Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.13

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319815**

Amount of Each Receipt this Period

24.70

Full Name (Last, First, Middle Initial)

## **B. REBECCA A ABEL**

Mailing Address 657 CORAL COURT

City State Zip Code  
 LINDENHURST IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Service Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374727**

Amount of Each Receipt this Period

24.70

Full Name (Last, First, Middle Initial)

## **C. ERNEST D ADAMS**

Mailing Address P O Box 105

City State Zip Code  
 Grayslake IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319642**

Amount of Each Receipt this Period

20.88

**SUBTOTAL** of Receipts This Page (optional)..... ►

70.28

**TOTAL** This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 174  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ERNEST D ADAMS**

Mailing Address P O Box 105

City	State	Zip Code
Grayslake	IL	60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

**Transaction ID : A2014-1374554**

Amount of Each Receipt this Period

20.88

Full Name (Last, First, Middle Initial)

**B. MICHAEL W AGAR**

Mailing Address 200 W MILL VALLEY DR

City	State	Zip Code
COLLEYVILLE	TX	76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Service Manager-Sr Te

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

**Transaction ID : A2014-1374662**

Amount of Each Receipt this Period

16.68

Full Name (Last, First, Middle Initial)

**C. DENIS BAILEY**

Mailing Address 8316 E. Tailfeather Dr

City	State	Zip Code
Scottsdale	AZ	85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

**Transaction ID : A2014-1319574**

Amount of Each Receipt this Period

23.26

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.82

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 174  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DENIS BAILEY**

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code  
 Scottsdale AZ 85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.08

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374487**

Amount of Each Receipt this Period

23.26

Full Name (Last, First, Middle Initial)

## **B. ALEXANDRA BALATSOUKAS**

Mailing Address 1225 W. Morse Unit 508

City State Zip Code  
 Chicago IL 60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.25

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319753**

Amount of Each Receipt this Period

32.38

Full Name (Last, First, Middle Initial)

## **C. ALEXANDRA BALATSOUKAS**

Mailing Address 1225 W. Morse Unit 508

City State Zip Code  
 Chicago IL 60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.63

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374665**

Amount of Each Receipt this Period

32.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 174  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM P BALLINGER**

Mailing Address 25 Blue Heron Way

City State Zip Code  
Skillman NJ 08558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Agency Contact Cen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.87

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319617**

Amount of Each Receipt this Period

39.37

Full Name (Last, First, Middle Initial)

**B. WILLIAM P BALLINGER**

Mailing Address 25 Blue Heron Way

City State Zip Code  
Skillman NJ 08558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Agency Contact Cen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.24

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374529**

Amount of Each Receipt this Period

39.37

Full Name (Last, First, Middle Initial)

**C. PHILLIP W BANET**

Mailing Address 4589 JADE LANE

City State Zip Code  
HOFFMAN ESTATES IL 60192

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.99

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319647**

Amount of Each Receipt this Period

42.21

**SUBTOTAL** of Receipts This Page (optional)..... ►

120.95

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 174

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PHILLIP W BANET**

Mailing Address 4589 JADE LANE

City State Zip Code  
 HOFFMAN ESTATES IL 60192

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.20

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374559**

Amount of Each Receipt this Period

42.21

Full Name (Last, First, Middle Initial)

**B. ROBERT K BECKER**

Mailing Address 5 Greensview Lane

City State Zip Code  
 Scotch Plains NJ 07076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319587**

Amount of Each Receipt this Period

30.33

Full Name (Last, First, Middle Initial)

**C. ROBERT K BECKER**

Mailing Address 5 Greensview Lane

City State Zip Code  
 Scotch Plains NJ 07076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.24

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374500**

Amount of Each Receipt this Period

30.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

102.87

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DIANE BELLAS**

Mailing Address 1402 N. Illinois Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.29

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319676**

Amount of Each Receipt this Period

22.86

Full Name (Last, First, Middle Initial)

**B. DIANE BELLAS**

Mailing Address 1402 N. Illinois Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.15

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374588**

Amount of Each Receipt this Period

22.86

Full Name (Last, First, Middle Initial)

**C. WALTER A BERKOWICZ**

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.59

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319717**

Amount of Each Receipt this Period

37.14

**SUBTOTAL** of Receipts This Page (optional)..... ►

82.86

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. WALTER A BERKOWICZ**

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.73

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A2014-1374629

Amount of Each Receipt this Period

37.14

Full Name (Last, First, Middle Initial)

**B. EDWARD A BIEMER**

Mailing Address 807 Greenwood Ave.

City State Zip Code  
GLENCOE IL 60022

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.47

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

Transaction ID : A2014-1319600

Amount of Each Receipt this Period

43.52

Full Name (Last, First, Middle Initial)

**C. EDWARD A BIEMER**

Mailing Address 807 Greenwood Ave.

City State Zip Code  
GLENCOE IL 60022

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.99

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A2014-1374513

Amount of Each Receipt this Period

43.52

SUBTOTAL of Receipts This Page (optional)..... ►

124.18

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT W BIRMAN**

Mailing Address 7533 WHITLOCK PLACE

City State Zip Code  
 LINCOLN NE 68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.85

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319720**

Amount of Each Receipt this Period

19.86

Full Name (Last, First, Middle Initial)

**B. ROBERT W BIRMAN**

Mailing Address 7533 WHITLOCK PLACE

City State Zip Code  
 LINCOLN NE 68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374632**

Amount of Each Receipt this Period

19.86

Full Name (Last, First, Middle Initial)

**C. SUSAN F BOMBECK**

Mailing Address 506 Blackhawk Ct

City State Zip Code  
 Loomis CA 95650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Technical Claim Process S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.81

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374728**

Amount of Each Receipt this Period

16.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

55.92

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DOUGLAS L BORG**

Mailing Address 11988 Crafton Hills Crt

City State Zip Code  
 Yucaipa CA 92399

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.88

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319812**

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

## **B. DOUGLAS L BORG**

Mailing Address 11988 Crafton Hills Crt

City State Zip Code  
 Yucaipa CA 92399

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.37

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374724**

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

## **C. WILLIAM B BORST**

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code  
 ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Head of Stratetic G

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.73

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319675**

Amount of Each Receipt this Period

31.66

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.64

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM B BORST**

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Head of Stratetic G

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.39

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374587**

Amount of Each Receipt this Period

31.66

Full Name (Last, First, Middle Initial)

**B. GWEN K BOWN**

Mailing Address 5220 SAWGRASS DR.

City State Zip Code  
LINCOLN NE 68526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.03

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319793**

Amount of Each Receipt this Period

17.16

Full Name (Last, First, Middle Initial)

**C. GWEN K BOWN**

Mailing Address 5220 SAWGRASS DR.

City State Zip Code  
LINCOLN NE 68526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.19

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374705**

Amount of Each Receipt this Period

17.16

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.98

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LONDON B BRADLEY**

Mailing Address 6350 S Langdale Way

City State Zip Code  
Aurora CO 80016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.10

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319799**

Amount of Each Receipt this Period

38.33

Full Name (Last, First, Middle Initial)

## **B. LONDON B BRADLEY**

Mailing Address 6350 S Langdale Way

City State Zip Code  
Aurora CO 80016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.43

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374711**

Amount of Each Receipt this Period

38.33

Full Name (Last, First, Middle Initial)

## **C. KENNETH A BRANCH**

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code  
IVANHOE IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-AHA-Independent Channe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.96

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319777**

Amount of Each Receipt this Period

23.34

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KENNETH A BRANCH**

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code  
IVANHOE IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AHA-Independent Channe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.30

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374689**

Amount of Each Receipt this Period

23.34

Full Name (Last, First, Middle Initial)

## **B. DUDLEY R BRIGHT**

Mailing Address 18135 W MEANDER DR

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.36

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319611**

Amount of Each Receipt this Period

21.41

Full Name (Last, First, Middle Initial)

## **C. DUDLEY R BRIGHT**

Mailing Address 18135 W MEANDER DR

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.77

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374524**

Amount of Each Receipt this Period

21.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

66.16

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. SHAWN L BROADFIELD**

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.95

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319681**

Amount of Each Receipt this Period

53.59

Full Name (Last, First, Middle Initial)

## **B. SHAWN L BROADFIELD**

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.54

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374593**

Amount of Each Receipt this Period

53.59

Full Name (Last, First, Middle Initial)

## **C. LORRIE K BROUSE**

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code  
 FRANKLIN TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.39

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319626**

Amount of Each Receipt this Period

40.80

**SUBTOTAL** of Receipts This Page (optional)..... ►

147.98

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LORRIE K BROUSE**

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code  
 FRANKLIN TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.19

Date of Receipt

MM / DD / YYYY  
 06 / 26 / 2014

**Transaction ID : A2014-1374538**

Amount of Each Receipt this Period

40.80

Full Name (Last, First, Middle Initial)

## **B. PAMELA S BROWN**

Mailing Address 5886 TEAL LANE

City State Zip Code  
 LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.15

Date of Receipt

MM / DD / YYYY  
 06 / 13 / 2014

**Transaction ID : A2014-1319746**

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

## **C. PAMELA S BROWN**

Mailing Address 5886 TEAL LANE

City State Zip Code  
 LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.15

Date of Receipt

MM / DD / YYYY  
 06 / 26 / 2014

**Transaction ID : A2014-1374658**

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

82.80

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANNE MARIE L BRUNNER**

Mailing Address 2514 SOUTH WESLEY AVE

City  
BERWYN

State  
IL

Zip Code  
60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.68

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319680**

Amount of Each Receipt this Period

40.67

Full Name (Last, First, Middle Initial)

**B. ANNE MARIE L BRUNNER**

Mailing Address 2514 SOUTH WESLEY AVE

City  
BERWYN

State  
IL

Zip Code  
60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.35

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374592**

Amount of Each Receipt this Period

40.67

Full Name (Last, First, Middle Initial)

**C. JOHN E BUCHANAN**

Mailing Address 26 W. 690 LINDSEY AVE.

City  
WINFIELD

State  
IL

Zip Code  
60190

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.86

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319737**

Amount of Each Receipt this Period

18.08

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

99.42

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code  
 WINFIELD IL 60190

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.94

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374649

Amount of Each Receipt this Period

18.08

Full Name (Last, First, Middle Initial)

B. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City State Zip Code  
 Antioch IL 60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.04

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : A2014-1319678

Amount of Each Receipt this Period

16.76

Full Name (Last, First, Middle Initial)

C. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City State Zip Code  
 Antioch IL 60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374590

Amount of Each Receipt this Period

16.76

SUBTOTAL of Receipts This Page (optional)..... ►

51.60

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. TYRONE A BURNO**

Mailing Address 868 CHARLTON ROAD

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.26

Date of Receipt

06 / 13 / 2014

Transaction ID : A2014-1319608

Amount of Each Receipt this Period

17.38

Full Name (Last, First, Middle Initial)

## **B. TYRONE A BURNO**

Mailing Address 868 CHARLTON ROAD

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.64

Date of Receipt

06 / 26 / 2014

Transaction ID : A2014-1374521

Amount of Each Receipt this Period

17.38

Full Name (Last, First, Middle Initial)

## **C. GREGORY C BURNS**

Mailing Address 2000 N. BROADMOOR LANE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.80

Date of Receipt

06 / 13 / 2014

Transaction ID : A2014-1319604

Amount of Each Receipt this Period

58.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

93.61

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY C BURNS**

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code  
VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

754.65

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374517**

Amount of Each Receipt this Period

58.85

Full Name (Last, First, Middle Initial)

**B. ALICE M BYRNE**

Mailing Address 4121 109TH STREET

City State Zip Code  
PLEASANT PRAIRI WI 53158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1074.48

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319768**

Amount of Each Receipt this Period

90.29

Full Name (Last, First, Middle Initial)

**C. ALICE M BYRNE**

Mailing Address 4121 109TH STREET

City State Zip Code  
PLEASANT PRAIRI WI 53158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.77

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374680**

Amount of Each Receipt this Period

90.29

**SUBTOTAL** of Receipts This Page (optional)..... ►

239.43

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Alfredo M Cantoral**

Mailing Address 340 W Superior St

City

Chicago

State

IL

Zip Code

60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.29

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319843**

Amount of Each Receipt this Period

26.48

Full Name (Last, First, Middle Initial)

**B. Alfredo M Cantoral**

Mailing Address 340 W Superior St

City

Chicago

State

IL

Zip Code

60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.77

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374755**

Amount of Each Receipt this Period

26.48

Full Name (Last, First, Middle Initial)

**C. VIRGINIA O CHIAPPETTA**

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.55

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319725**

Amount of Each Receipt this Period

21.54

**SUBTOTAL** of Receipts This Page (optional)..... ►

74.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. VIRGINIA O CHIAPPETTA**

Mailing Address 165 ARLINGTON AVE

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.09

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374637**

Amount of Each Receipt this Period

21.54

Full Name (Last, First, Middle Initial)

**B. BRIAN L CLARK**

Mailing Address 257 Lake Circle

City State Zip Code  
MADISON MS 39110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.08

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319776**

Amount of Each Receipt this Period

19.05

Full Name (Last, First, Middle Initial)

**C. BRIAN L CLARK**

Mailing Address 257 Lake Circle

City State Zip Code  
MADISON MS 39110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.13

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374688**

Amount of Each Receipt this Period

19.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

59.64

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. EDWARD T CLARK**

Mailing Address 2907 GLENARYE DR

City  
LINDENHURST

State Zip Code  
IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.60

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319730**

Amount of Each Receipt this Period

29.18

Full Name (Last, First, Middle Initial)

## **B. EDWARD T CLARK**

Mailing Address 2907 GLENARYE DR

City  
LINDENHURST

State Zip Code  
IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.96

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374642**

Amount of Each Receipt this Period

32.36

Full Name (Last, First, Middle Initial)

## **C. CHRISTOPHER W CLAY**

Mailing Address 9832 Toscano Drive

City  
ELK GROVE

State Zip Code  
CA 95757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.98

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319828**

Amount of Each Receipt this Period

36.88

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.42

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 174  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER W CLAY**

Mailing Address 9832 Toscano Drive

City	State	Zip Code
ELK GROVE	CA	95757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

**Transaction ID : A2014-1374740**

Amount of Each Receipt this Period

36.88

Full Name (Last, First, Middle Initial)

**B. DEBORAH L CLOUSER**

Mailing Address 4667 TAMWORTH DR

City	State	Zip Code
PALM HARBOR	FL	34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

**Transaction ID : A2014-1319728**

Amount of Each Receipt this Period

33.41

Full Name (Last, First, Middle Initial)

**C. DEBORAH L CLOUSER**

Mailing Address 4667 TAMWORTH DR

City	State	Zip Code
PALM HARBOR	FL	34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

**Transaction ID : A2014-1374640**

Amount of Each Receipt this Period

33.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

103.70

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA D COCHRANE**

Mailing Address 270 FAIRVIEW AVENUE

City  
WINNETKA

State Zip Code  
IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.28

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319702**

Amount of Each Receipt this Period

39.13

Full Name (Last, First, Middle Initial)

## **B. LISA D COCHRANE**

Mailing Address 270 FAIRVIEW AVENUE

City  
WINNETKA

State Zip Code  
IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.41

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374614**

Amount of Each Receipt this Period

39.13

Full Name (Last, First, Middle Initial)

## **C. PATRICK E COCHRANE**

Mailing Address 6911 Brimstone Lane

City  
Fairfax Station

State Zip Code  
VA 22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.51

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319624**

Amount of Each Receipt this Period

17.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

95.26

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. PATRICK E COCHRANE**

Mailing Address 6911 Brimstone Lane

City State Zip Code  
 Fairfax Station VA 22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.51

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374536**

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

## **B. PATRICIA A COFFEY**

Mailing Address 21200 W. KEPWICK

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery & Risk M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319705**

Amount of Each Receipt this Period

36.36

Full Name (Last, First, Middle Initial)

## **C. PATRICIA A COFFEY**

Mailing Address 21200 W. KEPWICK

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery & Risk M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374617**

Amount of Each Receipt this Period

36.36

**SUBTOTAL** of Receipts This Page (optional)..... ►

89.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EDWARD T COLLINS**

Mailing Address 809 DUNHILL COURT

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.25

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319673**

Amount of Each Receipt this Period

51.92

Full Name (Last, First, Middle Initial)

**B. EDWARD T COLLINS**

Mailing Address 809 DUNHILL COURT

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.17

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374585**

Amount of Each Receipt this Period

51.92

Full Name (Last, First, Middle Initial)

**C. LARRY K CONLEE**

Mailing Address 363 Kensington Ct.

City  
Palatine

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.55

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319693**

Amount of Each Receipt this Period

21.36

**SUBTOTAL** of Receipts This Page (optional)..... ►

125.20

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. LARRY K CONLEE**

Mailing Address 363 Kensington Ct.

City State Zip Code  
 Palatine IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374605**

Amount of Each Receipt this Period

21.36

Full Name (Last, First, Middle Initial)

**B. PETER T CORRIGAN**

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code  
 GREEN OAKS IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Sales &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319572**

Amount of Each Receipt this Period

69.36

Full Name (Last, First, Middle Initial)

**C. PETER T CORRIGAN**

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code  
 GREEN OAKS IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Sales &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.57

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374485**

Amount of Each Receipt this Period

69.36

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.08



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. ERROL CRAMER**

Mailing Address 1111 SARANAC AVE.

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.86

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319707**

Amount of Each Receipt this Period

19.18

Full Name (Last, First, Middle Initial)

## **B. ERROL CRAMER**

Mailing Address 1111 SARANAC AVE.

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.04

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374619**

Amount of Each Receipt this Period

19.18

Full Name (Last, First, Middle Initial)

## **C. RICHARD C CRIST Jr.**

Mailing Address 252 Center Point Lane

City State Zip Code  
 Lansdale PA 19446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

909.21

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319609**

Amount of Each Receipt this Period

76.75

**SUBTOTAL** of Receipts This Page (optional)..... ►

115.11

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD C CRIST Jr.**

Mailing Address 252 Center Point Lane

City State Zip Code  
 Lansdale PA 19446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.96

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374522**

Amount of Each Receipt this Period

76.75

Full Name (Last, First, Middle Initial)

**B. ROBERT W DANIELS**

Mailing Address 1020 Pleasant Street #1

City State Zip Code  
 Oak Park IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319625**

Amount of Each Receipt this Period

40.58

Full Name (Last, First, Middle Initial)

**C. ROBERT W DANIELS**

Mailing Address 1020 Pleasant Street #1

City State Zip Code  
 Oak Park IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.99

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374537**

Amount of Each Receipt this Period

40.58

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

157.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN A DAVISON**

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.88

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319633**

Amount of Each Receipt this Period

18.78

Full Name (Last, First, Middle Initial)

**B. JOHN A DAVISON**

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.66

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374545**

Amount of Each Receipt this Period

18.78

Full Name (Last, First, Middle Initial)

**C. RANDALL S DECOURSEY**

Mailing Address 1954 Oakwood Dr

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Contact Center Impl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.51

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319674**

Amount of Each Receipt this Period

45.86

**SUBTOTAL** of Receipts This Page (optional)..... ►

83.42

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RANDALL S DECOURSEY**

Mailing Address 1954 Oakwood Dr

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-AF-Contact Center Impl

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.37

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374586**

Amount of Each Receipt this Period

45.86

Full Name (Last, First, Middle Initial)

**B. STEVEN J DEGNAN-SCHMIDT**

Mailing Address 1320 MULBERRY LN.

City State Zip Code  
CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company ATO-Mgmt Consulting-Direc

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.33

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319640**

Amount of Each Receipt this Period

43.18

Full Name (Last, First, Middle Initial)

**C. STEVEN J DEGNAN-SCHMIDT**

Mailing Address 1320 MULBERRY LN.

City State Zip Code  
CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company ATO-Mgmt Consulting-Direc

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.51

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374552**

Amount of Each Receipt this Period

43.18

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

132.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY F DEIGL**

Mailing Address 453 PRAIRIE

City  
ELMHURST

State Zip Code  
IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.31

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319741**

Amount of Each Receipt this Period

57.20

Full Name (Last, First, Middle Initial)

**B. JEFFREY F DEIGL**

Mailing Address 453 PRAIRIE

City  
ELMHURST

State Zip Code  
IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.51

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374653**

Amount of Each Receipt this Period

57.20

Full Name (Last, First, Middle Initial)

**C. DEIDRE B DERRIG**

Mailing Address 460 TOWER ROAD

City  
BARRINGTON

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.60

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319723**

Amount of Each Receipt this Period

22.98

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

137.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DEIDRE B DERRIG**

Mailing Address 460 TOWER ROAD

City  
BARRINGTON

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.58

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374635**

Amount of Each Receipt this Period

22.98

Full Name (Last, First, Middle Initial)

## **B. Kristine DiGirolamo**

Mailing Address 10123 NORTH RIVER ROAD

City  
BARRINGTON HILLS

State Zip Code  
IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.32

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319769**

Amount of Each Receipt this Period

21.68

Full Name (Last, First, Middle Initial)

## **C. Kristine DiGirolamo**

Mailing Address 10123 NORTH RIVER ROAD

City  
BARRINGTON HILLS

State Zip Code  
IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374681**

Amount of Each Receipt this Period

21.68

**SUBTOTAL** of Receipts This Page (optional)..... ►

66.34

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
Northfield IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.70

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319830**

Amount of Each Receipt this Period

65.52

Full Name (Last, First, Middle Initial)

**B. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
Northfield IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.22

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374742**

Amount of Each Receipt this Period

65.52

Full Name (Last, First, Middle Initial)

**C. SARAH R DONAHUE**

Mailing Address 4147 RFD

City State Zip Code  
LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.89

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319724**

Amount of Each Receipt this Period

61.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

192.51

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SARAH R DONAHUE**

Mailing Address 4147 RFD

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.36

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374636**

Amount of Each Receipt this Period

61.47

Full Name (Last, First, Middle Initial)

**B. BRIAN M DONLAN**

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.75

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319790**

Amount of Each Receipt this Period

21.72

Full Name (Last, First, Middle Initial)

**C. BRIAN M DONLAN**

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.47

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374702**

Amount of Each Receipt this Period

21.72

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

104.91



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICIA B DREXLER**

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.09

Date of Receipt

06 / 13 / 2014

Transaction ID : A2014-1319660

Amount of Each Receipt this Period

32.73

Full Name (Last, First, Middle Initial)

**B. PATRICIA B DREXLER**

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.82

Date of Receipt

06 / 26 / 2014

Transaction ID : A2014-1374572

Amount of Each Receipt this Period

32.73

Full Name (Last, First, Middle Initial)

**C. DONALD L DUFF**

Mailing Address 2 Washington Ct..

City

STREAMWOOD

State

IL

Zip Code

60107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.74

Date of Receipt

06 / 13 / 2014

Transaction ID : A2014-1319658

Amount of Each Receipt this Period

34.63

**SUBTOTAL** of Receipts This Page (optional)..... ►

100.09

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DONALD L DUFF**

Mailing Address 2 Washington Ct..

City  
STREAMWOOD

State Zip Code  
IL 60107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AB2B ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.37

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374570**

Amount of Each Receipt this Period

34.63

Full Name (Last, First, Middle Initial)

**B. MICHAEL S DUNN**

Mailing Address 18202 HARNISH RD.

City  
ROSCOE

State Zip Code  
IL 61073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Staff Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.22

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319712**

Amount of Each Receipt this Period

29.17

Full Name (Last, First, Middle Initial)

**C. MICHAEL S DUNN**

Mailing Address 18202 HARNISH RD.

City  
ROSCOE

State Zip Code  
IL 61073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Staff Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.39

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374624**

Amount of Each Receipt this Period

29.17

**SUBTOTAL** of Receipts This Page (optional)..... ►

92.97

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LAURA DUNNE**

Mailing Address 1860 Admiral Court

City State Zip Code  
 GLENVIEW IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company VP-ENC-Strategy & Project

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.04

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319713**

Amount of Each Receipt this Period

26.31

Full Name (Last, First, Middle Initial)

## **B. LAURA DUNNE**

Mailing Address 1860 Admiral Court

City State Zip Code  
 GLENVIEW IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company VP-ENC-Strategy & Project

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374625**

Amount of Each Receipt this Period

26.31

Full Name (Last, First, Middle Initial)

## **C. DOUGLAS P DUPONT**

Mailing Address 12 ESSEX LANE

City State Zip Code  
 LINCOLNSHIRE IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company MD-INV-Portfolio Manageme

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319763**

Amount of Each Receipt this Period

29.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

82.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DOUGLAS P DUPONT**

Mailing Address 12 ESSEX LANE

City State Zip Code  
 LINCOLNSHIRE IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.94

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374675**

Amount of Each Receipt this Period

29.38

Full Name (Last, First, Middle Initial)

## **B. JEFFREY P DWYER**

Mailing Address 44 CHAMPLAIN COURT

City State Zip Code  
 MANAHAWKIN NJ 08050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.97

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374484**

Amount of Each Receipt this Period

16.21

Full Name (Last, First, Middle Initial)

## **C. Thomas V Ealy**

Mailing Address 1541 West Wolfram Street

City State Zip Code  
 Chicago IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ENC-President Encompa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

995.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319844**

Amount of Each Receipt this Period

82.99

**SUBTOTAL** of Receipts This Page (optional)..... ►

128.58

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Thomas V Ealy

Mailing Address 1541 West Wolfram Street

City State Zip Code  
 Chicago IL 60657

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ENC-President Encompa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.87

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374756

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

B. ROBERT N EMMICH

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code  
 CANTON MS 39046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.73

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : A2014-1319820

Amount of Each Receipt this Period

18.95

Full Name (Last, First, Middle Initial)

C. ROBERT N EMMICH

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code  
 CANTON MS 39046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374732

Amount of Each Receipt this Period

18.95

SUBTOTAL of Receipts This Page (optional)..... ►

120.89

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN N ENRIGHT**

Mailing Address 10323 TRUMBULL AVE

City  
CHICAGO

State Zip Code  
IL 60655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.24

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319733**

Amount of Each Receipt this Period

53.85

Full Name (Last, First, Middle Initial)

**B. KATHLEEN N ENRIGHT**

Mailing Address 10323 TRUMBULL AVE

City  
CHICAGO

State Zip Code  
IL 60655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.09

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374645**

Amount of Each Receipt this Period

53.85

Full Name (Last, First, Middle Initial)

**C. MICHAEL L ESCOBAR**

Mailing Address 660 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.98

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319575**

Amount of Each Receipt this Period

58.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

166.55

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL L ESCOBAR**

Mailing Address 660 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.83

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374488**

Amount of Each Receipt this Period

58.85

Full Name (Last, First, Middle Initial)

**B. CAROLYN A FILIPOVIC**

Mailing Address 918 JUNIPER ROAD

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ethics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.61

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319756**

Amount of Each Receipt this Period

32.32

Full Name (Last, First, Middle Initial)

**C. CAROLYN A FILIPOVIC**

Mailing Address 918 JUNIPER ROAD

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ethics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.93

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374668**

Amount of Each Receipt this Period

32.32

**SUBTOTAL** of Receipts This Page (optional)..... ►

123.49

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. STEVEN FINE**

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code  
ANTIOCH IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319602**

Amount of Each Receipt this Period

28.46

Full Name (Last, First, Middle Initial)

## **B. STEVEN FINE**

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code  
ANTIOCH IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.46

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374515**

Amount of Each Receipt this Period

28.46

Full Name (Last, First, Middle Initial)

## **C. LISA J FLANARY**

Mailing Address 1007 Harris Road

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-AF-Customer Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.08

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319765**

Amount of Each Receipt this Period

40.39

**SUBTOTAL** of Receipts This Page (optional)..... ►

97.31

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA J FLANARY**

Mailing Address 1007 Harris Road

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Customer Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.47

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374677**

Amount of Each Receipt this Period

40.39

Full Name (Last, First, Middle Initial)

## **B. ANGELA K FONTANA**

Mailing Address 1280 WILD ROSE LANE

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.21

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319792**

Amount of Each Receipt this Period

54.33

Full Name (Last, First, Middle Initial)

## **C. ANGELA K FONTANA**

Mailing Address 1280 WILD ROSE LANE

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.54

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374704**

Amount of Each Receipt this Period

54.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. SARA A FOSTER**

Mailing Address 2216 BARRETT DR

City  
ALGONQUIN

State Zip Code  
IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.43

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319692**

Amount of Each Receipt this Period

35.54

Full Name (Last, First, Middle Initial)

## **B. SARA A FOSTER**

Mailing Address 2216 BARRETT DR

City  
ALGONQUIN

State Zip Code  
IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.97

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374604**

Amount of Each Receipt this Period

35.54

Full Name (Last, First, Middle Initial)

## **C. ANGELA M Fusco**

Mailing Address 29 Tullach Place

City  
Stonebrae

State Zip Code  
CA 94542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.09

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319610**

Amount of Each Receipt this Period

43.28

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.36

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANGELA M Fusco**

Mailing Address 29 Tullach Place

City State Zip Code  
 Stonebrae CA 94542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.37

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374523**

Amount of Each Receipt this Period

43.28

Full Name (Last, First, Middle Initial)

**B. VINCENT A FUSCO**

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code  
 DIX HILLS NY 11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319573**

Amount of Each Receipt this Period

28.50

Full Name (Last, First, Middle Initial)

**C. VINCENT A FUSCO**

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code  
 DIX HILLS NY 11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374486**

Amount of Each Receipt this Period

28.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

100.28

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANNA M GALL**

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code  
CRYSTAL LAKE IL 60014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.06

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319656**

Amount of Each Receipt this Period

17.75

Full Name (Last, First, Middle Initial)

**B. ANNA M GALL**

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code  
CRYSTAL LAKE IL 60014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.81

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374568**

Amount of Each Receipt this Period

17.75

Full Name (Last, First, Middle Initial)

**C. NICK GEORGAKOPOULOS**

Mailing Address 1129 N Mitchell Ave

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.32

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319697**

Amount of Each Receipt this Period

40.77

**SUBTOTAL** of Receipts This Page (optional)..... ►

76.27

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 174  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. NICK GEORGAKOPOULOS**

Mailing Address 1129 N Mitchell Ave

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.09

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

**Transaction ID : A2014-1374609**

Amount of Each Receipt this Period

40.77

Full Name (Last, First, Middle Initial)

**B. MARIBEL V GERSTNER**

Mailing Address 2754 CHARLIE CT.

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Pres &amp; Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.17

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	13	/	2014

**Transaction ID : A2014-1319670**

Amount of Each Receipt this Period

50.99

Full Name (Last, First, Middle Initial)

**C. MARIBEL V GERSTNER**

Mailing Address 2754 CHARLIE CT.

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Pres &amp; Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.16

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

**Transaction ID : A2014-1374582**

Amount of Each Receipt this Period

50.99

**SUBTOTAL** of Receipts This Page (optional)..... ►

142.75

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BONNIE S GILL**

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code  
 HOFFMAN ESTATES IL 60169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.63

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319794**

Amount of Each Receipt this Period

34.03

Full Name (Last, First, Middle Initial)

## **B. BONNIE S GILL**

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code  
 HOFFMAN ESTATES IL 60169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.66

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374706**

Amount of Each Receipt this Period

34.03

Full Name (Last, First, Middle Initial)

## **C. JOAN M GILMORE**

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.10

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319576**

Amount of Each Receipt this Period

46.08

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.14

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. JOAN M GILMORE**

Mailing Address 656 S BUCKINGHAM CT

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A2014-1374489

Amount of Each Receipt this Period

46.08

Full Name (Last, First, Middle Initial)

**B. WILLIAM T GOFF**

Mailing Address 310 Plantation Way

City	State	Zip Code
Roswell	GA	30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : A2014-1319577

Amount of Each Receipt this Period

23.02

Full Name (Last, First, Middle Initial)

**C. WILLIAM T GOFF**

Mailing Address 310 Plantation Way

City	State	Zip Code
Roswell	GA	30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A2014-1374490

Amount of Each Receipt this Period

23.02

SUBTOTAL of Receipts This Page (optional)..... ►

92.12

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. BRUCE R GOLDBERG**

Mailing Address 10 MULBERRY LN

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.25

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319665**

Amount of Each Receipt this Period

22.27

Full Name (Last, First, Middle Initial)

**B. BRUCE R GOLDBERG**

Mailing Address 10 MULBERRY LN

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.52

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374577**

Amount of Each Receipt this Period

22.27

Full Name (Last, First, Middle Initial)

**C. ANN A GOULD**

Mailing Address 4071 NEWPORT LANE

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.64

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319817**

Amount of Each Receipt this Period

36.57

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.11

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. ANN A GOULD**

Mailing Address 4071 NEWPORT LANE

City State Zip Code  
 ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.21

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374729**

Amount of Each Receipt this Period

36.57

Full Name (Last, First, Middle Initial)

## **B. GEORGE F GRAWE**

Mailing Address 801 N. Vail Avenue

City State Zip Code  
 Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff & Retained C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.08

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319635**

Amount of Each Receipt this Period

53.80

Full Name (Last, First, Middle Initial)

## **C. GEORGE F GRAWE**

Mailing Address 801 N. Vail Avenue

City State Zip Code  
 Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff & Retained C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.88

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374547**

Amount of Each Receipt this Period

53.80

**SUBTOTAL** of Receipts This Page (optional)..... ►

144.17

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KELLIE H GREEN**

Mailing Address 150 Meadowlark Circle

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Director Agency Suppor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.53

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319622**

Amount of Each Receipt this Period

19.95

Full Name (Last, First, Middle Initial)

**B. KELLIE H GREEN**

Mailing Address 150 Meadowlark Circle

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Director Agency Suppor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.48

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374534**

Amount of Each Receipt this Period

19.95

Full Name (Last, First, Middle Initial)

**c. Mark A Green**

Mailing Address 1711 Wildwood Ct

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-EB-President Ivantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.73

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319837**

Amount of Each Receipt this Period

62.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

101.90

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Mark A Green**

Mailing Address 1711 Wildwood Ct

City  
Glenview

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-EB-President Ivantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.61

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374749**

Amount of Each Receipt this Period

76.88

Full Name (Last, First, Middle Initial)

**B. JUDITH P GREFFIN**

Mailing Address 338 North Kenilworth

City  
OAK PARK

State Zip Code  
IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.15

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319644**

Amount of Each Receipt this Period

77.31

Full Name (Last, First, Middle Initial)

**C. JUDITH P GREFFIN**

Mailing Address 338 North Kenilworth

City  
OAK PARK

State Zip Code  
IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

989.46

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374556**

Amount of Each Receipt this Period

77.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. M'BA G GREGOIRE**

Mailing Address 35 Linden Road

City

Lake Zurich

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.11

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319819**

Amount of Each Receipt this Period

19.39

Full Name (Last, First, Middle Initial)

## **B. M'BA G GREGOIRE**

Mailing Address 35 Linden Road

City

Lake Zurich

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.50

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374731**

Amount of Each Receipt this Period

19.39

Full Name (Last, First, Middle Initial)

## **C. MARYLIN H GROOM**

Mailing Address 170 ASPINWALL STREET

City

WESTBURY

State

NY

Zip Code

11590

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.83

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319589**

Amount of Each Receipt this Period

9.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

48.48

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARYLIN H GROOM**

Mailing Address 170 ASPINWALL STREET

City State Zip Code  
 WESTBURY NY 11590

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374502**

Amount of Each Receipt this Period

12.36

Full Name (Last, First, Middle Initial)

**B. Gerard T GROUZARD**

Mailing Address 943 W CAROLYN DR

City State Zip Code  
 PALATINE IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.28

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319663**

Amount of Each Receipt this Period

16.75

Full Name (Last, First, Middle Initial)

**C. Gerard T GROUZARD**

Mailing Address 943 W CAROLYN DR

City State Zip Code  
 PALATINE IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374575**

Amount of Each Receipt this Period

16.75

**SUBTOTAL** of Receipts This Page (optional)..... ►

45.86

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY J GUIDOS**

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-President Allstate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.55

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319755**

Amount of Each Receipt this Period

33.70

Full Name (Last, First, Middle Initial)

**B. GREGORY J GUIDOS**

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-President Allstate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.25

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374667**

Amount of Each Receipt this Period

33.70

Full Name (Last, First, Middle Initial)

**C. Sanjay Gupta**

Mailing Address 1971 Farnsworth Ln

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation & Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.52

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319854**

Amount of Each Receipt this Period

64.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

131.55

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Sanjay Gupta**

Mailing Address 1971 Farnsworth Ln

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation & Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.67

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374766**

Amount of Each Receipt this Period

64.15

Full Name (Last, First, Middle Initial)

**B. ROBERT R HALPERN-GIVENS**

Mailing Address 3001 SUTTON WOODS CT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.59

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319732**

Amount of Each Receipt this Period

18.20

Full Name (Last, First, Middle Initial)

**C. ROBERT R HALPERN-GIVENS**

Mailing Address 3001 SUTTON WOODS CT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.79

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374644**

Amount of Each Receipt this Period

18.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.55

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RANDALL M HANSON**

Mailing Address 840 ALLEGHANY

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.87

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319800**

Amount of Each Receipt this Period

41.78

Full Name (Last, First, Middle Initial)

**B. RANDALL M HANSON**

Mailing Address 840 ALLEGHANY

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.65

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374712**

Amount of Each Receipt this Period

41.78

Full Name (Last, First, Middle Initial)

**c. David S Harper**

Mailing Address 41 Lancaster Lane

City State Zip Code  
 Lincolnshire IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.58

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319839**

Amount of Each Receipt this Period

67.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.76

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. David S Harper**

Mailing Address 41 Lancaster Lane

City State Zip Code  
Lincolnshire IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.78

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374751**

Amount of Each Receipt this Period

67.20

Full Name (Last, First, Middle Initial)

**B. Cheryl A Harris**

Mailing Address 4136 Three Lakes Drive

City State Zip Code  
Long Grove IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-SPS-Sourcing & Procur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.15

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319851**

Amount of Each Receipt this Period

64.62

Full Name (Last, First, Middle Initial)

**C. Cheryl A Harris**

Mailing Address 4136 Three Lakes Drive

City State Zip Code  
Long Grove IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-SPS-Sourcing & Procur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.41

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374763**

Amount of Each Receipt this Period

44.26

**SUBTOTAL** of Receipts This Page (optional)..... ►

176.08

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code  
 Chicago IL 60622

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.17

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : A2014-1319833

Amount of Each Receipt this Period

18.17

Full Name (Last, First, Middle Initial)

B. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code  
 Chicago IL 60622

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.34

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374745

Amount of Each Receipt this Period

18.17

Full Name (Last, First, Middle Initial)

C. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City State Zip Code  
 Ponte Vedra FL 32082

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Ops &amp; Technology AI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : A2014-1319641

Amount of Each Receipt this Period

39.42

SUBTOTAL of Receipts This Page (optional)..... ►

75.76

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KEITH A HAUSCHILDT**

Mailing Address 25 Players Club Villas Rd

City State Zip Code  
Ponte Vedra FL 32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Ops & Technology AI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.97

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374553**

Amount of Each Receipt this Period

39.42

Full Name (Last, First, Middle Initial)

**B. Troy M Hawkes**

Mailing Address 2557 Kane Lane

City State Zip Code  
Batavia IL 60510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.20

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319855**

Amount of Each Receipt this Period

46.15

Full Name (Last, First, Middle Initial)

**C. Troy M Hawkes**

Mailing Address 2557 Kane Lane

City State Zip Code  
Batavia IL 60510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.35

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374767**

Amount of Each Receipt this Period

46.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

131.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY R HEALY**

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code  
 CASTLE ROCK CO 80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.83

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319595**

Amount of Each Receipt this Period

17.30

Full Name (Last, First, Middle Initial)

**B. JEFFREY R HEALY**

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code  
 CASTLE ROCK CO 80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.13

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374508**

Amount of Each Receipt this Period

17.30

Full Name (Last, First, Middle Initial)

**c. Jon E Hedegard**

Mailing Address 1314 Rose St. NE

City State Zip Code  
 Olympia WA 98506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.61

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319856**

Amount of Each Receipt this Period

33.23

**SUBTOTAL** of Receipts This Page (optional)..... ►

67.83

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City	State	Zip Code
Olympia	WA	98506

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A2014-1374768

Amount of Each Receipt this Period

33.23

Full Name (Last, First, Middle Initial)

B. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : A2014-1319568

Amount of Each Receipt this Period

17.19

Full Name (Last, First, Middle Initial)

C. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A2014-1374481

Amount of Each Receipt this Period

17.19

SUBTOTAL of Receipts This Page (optional)..... ►

67.61

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EYVONNA HEMPHILL**

Mailing Address 337 46TH AVE

City  
BELLWOOD

State Zip Code  
IL 60104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B ABI-Qual & Compl-Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.47

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319672**

Amount of Each Receipt this Period

17.53

Full Name (Last, First, Middle Initial)

**B. EYVONNA HEMPHILL**

Mailing Address 337 46TH AVE

City  
BELLWOOD

State Zip Code  
IL 60104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AB2B ABI-Qual & Compl-Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374584**

Amount of Each Receipt this Period

17.53

Full Name (Last, First, Middle Initial)

**C. Barbara A Higgins**

Mailing Address 2107 N Lakewood Ave

City  
Chicago

State Zip Code  
IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Customer Retention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.01

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319852**

Amount of Each Receipt this Period

37.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

72.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. Barbara A Higgins**

Mailing Address 2107 N Lakewood Ave

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Customer Retention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.86

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374764**

Amount of Each Receipt this Period

37.85

Full Name (Last, First, Middle Initial)

## **B. EDDIE H HILL**

Mailing Address 8390 Burnt Chimney Road

City State Zip Code  
 Wirtz VA 24184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.64

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319618**

Amount of Each Receipt this Period

17.03

Full Name (Last, First, Middle Initial)

## **C. EDDIE H HILL**

Mailing Address 8390 Burnt Chimney Road

City State Zip Code  
 Wirtz VA 24184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.67

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374530**

Amount of Each Receipt this Period

17.03

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

71.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM G HILL**

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1632.89

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319623**

Amount of Each Receipt this Period

137.69

Full Name (Last, First, Middle Initial)

**B. WILLIAM G HILL**

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1770.58

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374535**

Amount of Each Receipt this Period

137.69

Full Name (Last, First, Middle Initial)

**C. SHERYL L HODGES**

Mailing Address 2510 OAK AVENUE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.60

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374613**

Amount of Each Receipt this Period

15.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

290.89

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARY L HUBER**

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code  
 ARLINGTON HTS. IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 HR-Communications-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

06 / 13 / 2014

Transaction ID : A2014-1319773

Amount of Each Receipt this Period

20.90

Full Name (Last, First, Middle Initial)

**B. MARY L HUBER**

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code  
 ARLINGTON HTS. IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 HR-Communications-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.75

Date of Receipt

06 / 26 / 2014

Transaction ID : A2014-1374685

Amount of Each Receipt this Period

20.90

Full Name (Last, First, Middle Initial)

**C. MICHAEL S HURLEY**

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code  
 JACKSONVILLE FL 32259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.80

Date of Receipt

06 / 13 / 2014

Transaction ID : A2014-1319613

Amount of Each Receipt this Period

22.79

**SUBTOTAL** of Receipts This Page (optional)..... ►

64.59

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL S HURLEY**

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code  
**JACKSONVILLE FL 32259**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**291.59**

Date of Receipt

**06 / 26 / 2014**

**Transaction ID : A2014-1374526**

Amount of Each Receipt this Period

**22.79**

Full Name (Last, First, Middle Initial)

**B. STEPHEN L IHM**

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code  
**KILDEER IL 60047**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**572.28**

Date of Receipt

**06 / 13 / 2014**

**Transaction ID : A2014-1319698**

Amount of Each Receipt this Period

**57.51**

Full Name (Last, First, Middle Initial)

**C. STEPHEN L IHM**

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code  
**KILDEER IL 60047**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**629.79**

Date of Receipt

**06 / 26 / 2014**

**Transaction ID : A2014-1374610**

Amount of Each Receipt this Period

**57.51**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**137.81**

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARIANO A IMBARRATO**

Mailing Address 10825 CHUCER DRIVE

City State Zip Code  
 WILLOW SPRINGS IL 60480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Vice PresidentCapital PI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.94

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319686**

Amount of Each Receipt this Period

49.80

Full Name (Last, First, Middle Initial)

**B. MARIANO A IMBARRATO**

Mailing Address 10825 CHUCER DRIVE

City State Zip Code  
 WILLOW SPRINGS IL 60480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Vice PresidentCapital PI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.74

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374598**

Amount of Each Receipt this Period

49.80

Full Name (Last, First, Middle Initial)

**C. LYNNE A IVERSON**

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.16

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319677**

Amount of Each Receipt this Period

32.30

**SUBTOTAL** of Receipts This Page (optional)..... ►

131.90

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. LYNNE A IVERSON**

Mailing Address 890 BLAZING STAR TRAIL

City  
CARY

State  
IL

Zip Code  
60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.46

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374589**

Amount of Each Receipt this Period

32.30

Full Name (Last, First, Middle Initial)

**B. BOB A JACKSON**

Mailing Address 226 Maison Court

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.05

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319804**

Amount of Each Receipt this Period

23.85

Full Name (Last, First, Middle Initial)

**C. BOB A JACKSON**

Mailing Address 226 Maison Court

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.90

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374716**

Amount of Each Receipt this Period

23.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES C JAMIESON**

Mailing Address 24160 North Beach Dr

City State Zip Code  
 Cary IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.69

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319661**

Amount of Each Receipt this Period

40.94

Full Name (Last, First, Middle Initial)

**B. JAMES C JAMIESON**

Mailing Address 24160 North Beach Dr

City State Zip Code  
 Cary IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.63

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374573**

Amount of Each Receipt this Period

40.94

Full Name (Last, First, Middle Initial)

**C. Jerry A Johnson**

Mailing Address 5233 Tree Way Lane South

City State Zip Code  
 Jacksonville FL 32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AWD-Manager-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.05

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319849**

Amount of Each Receipt this Period

17.74

**SUBTOTAL** of Receipts This Page (optional)..... ►

99.62

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Jerry A Johnson**

Mailing Address 5233 Tree Way Lane South

City State Zip Code  
Jacksonville FL 32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AWD-Manager-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.79

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374761**

Amount of Each Receipt this Period

17.74

Full Name (Last, First, Middle Initial)

**B. JAMES W JONSKE**

Mailing Address 1217 BARCLAY CIRCLE

City State Zip Code  
BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.71

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319760**

Amount of Each Receipt this Period

18.44

Full Name (Last, First, Middle Initial)

**C. JAMES W JONSKE**

Mailing Address 1217 BARCLAY CIRCLE

City State Zip Code  
BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.15

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374672**

Amount of Each Receipt this Period

18.44

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

54.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN A KANE**

Mailing Address 2180 Trailblazer Way

City State Zip Code  
Castle Rock CO 80109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.53

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319580**

Amount of Each Receipt this Period

25.23

Full Name (Last, First, Middle Initial)

**B. JOHN A KANE**

Mailing Address 2180 Trailblazer Way

City State Zip Code  
Castle Rock CO 80109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.76

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374493**

Amount of Each Receipt this Period

25.23

Full Name (Last, First, Middle Initial)

**C. TIMOTHY M KATHRENS**

Mailing Address 703 HIGHLAND CT

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Information Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.98

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319767**

Amount of Each Receipt this Period

18.30

**SUBTOTAL** of Receipts This Page (optional)..... ►

68.76

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. TIMOTHY M KATHRENS**

Mailing Address 703 HIGHLAND CT

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Information Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.28

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374679**

Amount of Each Receipt this Period

18.30

Full Name (Last, First, Middle Initial)

**B. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City State Zip Code  
 Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319846**

Amount of Each Receipt this Period

58.08

Full Name (Last, First, Middle Initial)

**C. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City State Zip Code  
 Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374758**

Amount of Each Receipt this Period

58.08

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

134.46



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER R KIAH**

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ST-Protection Program

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.99

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319566**

Amount of Each Receipt this Period

57.59

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER R KIAH**

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ST-Protection Program

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.58

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374479**

Amount of Each Receipt this Period

57.59

Full Name (Last, First, Middle Initial)

**C. CURTIS L KIBLER**

Mailing Address 1332 BAY MEADOWS DR

City

BARTLETT

State

IL

Zip Code

60103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.87

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319662**

Amount of Each Receipt this Period

44.98

**SUBTOTAL** of Receipts This Page (optional)..... ►

160.16

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. CURTIS L KIBLER**

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code  
 BARTLETT IL 60103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.85

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374574**

Amount of Each Receipt this Period

44.98

Full Name (Last, First, Middle Initial)

## **B. BARBARA L KILROY**

Mailing Address 177 Robincrest Lane

City State Zip Code  
 Lindenhurst IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 PF-Fin Analysis-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.16

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319616**

Amount of Each Receipt this Period

21.62

Full Name (Last, First, Middle Initial)

## **C. BARBARA L KILROY**

Mailing Address 177 Robincrest Lane

City State Zip Code  
 Lindenhurst IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 PF-Fin Analysis-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.78

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374528**

Amount of Each Receipt this Period

21.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.22

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANNE I KIM**

Mailing Address 1580 SHERMAN AVE # 201

City  
EVANSTON

State Zip Code  
IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.77

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319744**

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

**B. ANNE I KIM**

Mailing Address 1580 SHERMAN AVE # 201

City  
EVANSTON

State Zip Code  
IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.82

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374656**

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

**c. Stephen B King**

Mailing Address 1620 Monterey

City  
Glenview

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.47

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319835**

Amount of Each Receipt this Period

30.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. Stephen B King**

Mailing Address 1620 Monterey

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Leadership &amp; Talent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.39

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374747

Amount of Each Receipt this Period

30.92

Full Name (Last, First, Middle Initial)

**B. Brian D Klemstein**

Mailing Address 608 Haddon Circle

City State Zip Code  
 Vernon Hills IL 60061

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.58

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374744

Amount of Each Receipt this Period

16.13

Full Name (Last, First, Middle Initial)

**C. TIMOTHY L KNAPP**

Mailing Address 132 FARMSTEAD CIRCLE

City State Zip Code  
 LEBANON PA 17042

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.02

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : A2014-1319607

Amount of Each Receipt this Period

22.92

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.97

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. TIMOTHY L KNAPP**

Mailing Address 132 FARMSTEAD CIRCLE

City  
LEBANON

State Zip Code  
PA 17042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.94

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374520**

Amount of Each Receipt this Period

22.92

Full Name (Last, First, Middle Initial)

**B. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.08

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319798**

Amount of Each Receipt this Period

38.51

Full Name (Last, First, Middle Initial)

**C. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.59

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374710**

Amount of Each Receipt this Period

38.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

99.94

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAIKRISHNA KUCHIMANCHI**

Mailing Address 4513 Jenna Rd

City  
Glenview

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.90

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319736**

Amount of Each Receipt this Period

36.71

Full Name (Last, First, Middle Initial)

**B. JAIKRISHNA KUCHIMANCHI**

Mailing Address 4513 Jenna Rd

City  
Glenview

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.61

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374648**

Amount of Each Receipt this Period

36.71

Full Name (Last, First, Middle Initial)

**C. J. Wayne W KULLMAN**

Mailing Address 2005 Henley St.

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ST-Agency Sales Cross

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.32

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319631**

Amount of Each Receipt this Period

24.60

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. J. Wayne W KULLMAN**

Mailing Address 2005 Henley St.

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ST-Agency Sales Cross

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.92

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374543**

Amount of Each Receipt this Period

24.60

Full Name (Last, First, Middle Initial)

**B. JEFFREY F LEASENDALE**

Mailing Address 422 RIDGECREST RD NE

City  
ATLANTA

State Zip Code  
GA 30307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Lead Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.46

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374512**

Amount of Each Receipt this Period

15.60

Full Name (Last, First, Middle Initial)

**C. SUSAN L LEES**

Mailing Address 1705 DARTMOUTH LN

City  
DEERFIELD

State Zip Code  
IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1281.15

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319565**

Amount of Each Receipt this Period

109.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

149.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SUSAN L LEES**

Mailing Address 1705 DARTMOUTH LN

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.77

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374478**

Amount of Each Receipt this Period

109.62

Full Name (Last, First, Middle Initial)

**B. GARY L LEVINE**

Mailing Address 16340 W. Arlington Drive

City State Zip Code  
Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.47

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319783**

Amount of Each Receipt this Period

20.09

Full Name (Last, First, Middle Initial)

**C. GARY L LEVINE**

Mailing Address 16340 W. Arlington Drive

City State Zip Code  
Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.56

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374695**

Amount of Each Receipt this Period

20.09

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.80



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. Peter G Logothesis**

Mailing Address 2326 Indian Ridge Drive

City  
Glenview

State  
IL

Zip Code  
60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.90

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319847**

Amount of Each Receipt this Period

63.04

Full Name (Last, First, Middle Initial)

## **B. Peter G Logothesis**

Mailing Address 2326 Indian Ridge Drive

City  
Glenview

State  
IL

Zip Code  
60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

813.94

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374759**

Amount of Each Receipt this Period

63.04

Full Name (Last, First, Middle Initial)

## **C. RHONDA J LOWE**

Mailing Address 2501 Catocin Court Unit 3A

City  
Frederick

State  
MD

Zip Code  
21702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.96

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374661**

Amount of Each Receipt this Period

15.67

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City  
 GLENDALE

State Zip Code  
 CA 91226

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.19

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	13	/	2014

Transaction ID : A2014-1319818

Amount of Each Receipt this Period

37.37

Full Name (Last, First, Middle Initial)

B. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City  
 GLENDALE

State Zip Code  
 CA 91226

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.56

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

Transaction ID : A2014-1374730

Amount of Each Receipt this Period

37.37

Full Name (Last, First, Middle Initial)

C. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City  
 SCHAUMBURG

State Zip Code  
 IL 60193

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.69

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	13	/	2014

Transaction ID : A2014-1319710

Amount of Each Receipt this Period

22.93

SUBTOTAL of Receipts This Page (optional)..... ►

97.67

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. COREY C LUECHT**

Mailing Address 843 Spring Cove Dr

City  
SCHAUMBURG

State Zip Code  
IL 60193

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.62

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374622**

Amount of Each Receipt this Period

22.93

Full Name (Last, First, Middle Initial)

## **B. BENJAMIN E LUMICAO**

Mailing Address 9655 Woods Drive Unit 708

City  
Skokie

State Zip Code  
IL 60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.41

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319726**

Amount of Each Receipt this Period

35.69

Full Name (Last, First, Middle Initial)

## **C. BENJAMIN E LUMICAO**

Mailing Address 9655 Woods Drive Unit 708

City  
Skokie

State Zip Code  
IL 60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.10

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374638**

Amount of Each Receipt this Period

35.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

94.31

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. Katherine A Mabe**

Mailing Address 2750 Commons Drive

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PRES-B2B-Business to Busi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1343.04

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : A2014-1319845

Amount of Each Receipt this Period

111.92

Full Name (Last, First, Middle Initial)

**B. Katherine A Mabe**

Mailing Address 2750 Commons Drive

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PRES-B2B-Business to Busi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1454.96

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A2014-1374757

Amount of Each Receipt this Period

111.92

Full Name (Last, First, Middle Initial)

**C. DANIEL J MACDONALD**

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code  
 CASTLE ROCK CO 80104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.78

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : A2014-1319772

Amount of Each Receipt this Period

22.90

SUBTOTAL of Receipts This Page (optional)..... ►

246.74

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DANIEL J MACDONALD**

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code  
 CASTLE ROCK CO 80104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374684**

Amount of Each Receipt this Period

22.90

Full Name (Last, First, Middle Initial)

**B. KENNETH P MARCOTTE**

Mailing Address 2311 HAVERTON DR

City State Zip Code  
 MUNDELEIN IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319671**

Amount of Each Receipt this Period

24.48

Full Name (Last, First, Middle Initial)

**C. KENNETH P MARCOTTE**

Mailing Address 2311 HAVERTON DR

City State Zip Code  
 MUNDELEIN IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.51

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374583**

Amount of Each Receipt this Period

24.48

**SUBTOTAL** of Receipts This Page (optional)..... ►

71.86

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Rhonda J Masser**

Mailing Address 4807 Wildwood Dr

City State Zip Code  
 McHenry IL 60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319651**

Amount of Each Receipt this Period

20.69

Full Name (Last, First, Middle Initial)

**B. Rhonda J Masser**

Mailing Address 4807 Wildwood Dr

City State Zip Code  
 McHenry IL 60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.17

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374563**

Amount of Each Receipt this Period

20.69

Full Name (Last, First, Middle Initial)

**C. JOHN R MATHEWS**

Mailing Address 401 E NORTH AVENUE

City State Zip Code  
 LAKE BLUFF IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.46

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319727**

Amount of Each Receipt this Period

22.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

64.25

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN R MATHEWS**

Mailing Address 401 E NORTH AVENUE

City

LAKE BLUFF

State

IL

Zip Code

60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.33

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374639**

Amount of Each Receipt this Period

22.87

Full Name (Last, First, Middle Initial)

**B. JOHN A MC LAUGHLIN**

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.28

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319684**

Amount of Each Receipt this Period

42.59

Full Name (Last, First, Middle Initial)

**C. JOHN A MC LAUGHLIN**

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.87

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374596**

Amount of Each Receipt this Period

42.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. LINDA H MCCLELLAN**

Mailing Address 5561 Hilltop Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.06

Date of Receipt

06 / 26 / 2014

Transaction ID : A2014-1374698

Amount of Each Receipt this Period

16.36

Full Name (Last, First, Middle Initial)

**B. SCOTT A MCCONNELL**

Mailing Address 21722 N TIMBER RIDGE CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-IT Capital Markets-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.42

Date of Receipt

06 / 13 / 2014

Transaction ID : A2014-1319649

Amount of Each Receipt this Period

20.51

Full Name (Last, First, Middle Initial)

**C. SCOTT A MCCONNELL**

Mailing Address 21722 N TIMBER RIDGE CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-IT Capital Markets-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.93

Date of Receipt

06 / 26 / 2014

Transaction ID : A2014-1374561

Amount of Each Receipt this Period

20.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

57.38

**TOTAL** This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOSEPH P MCCORMICK**

Mailing Address 808 PARKDALE CT.

City State Zip Code  
 SOUTHLAKE TX 76092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.50

Date of Receipt

MM / DD / YYYY  
 06 / 13 / 2014

**Transaction ID : A2014-1319615**

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

**B. LEE L McElroy**

Mailing Address 7808 ROYAL SYDNEY DR

City State Zip Code  
 GAINESVILLE VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.57

Date of Receipt

MM / DD / YYYY  
 06 / 13 / 2014

**Transaction ID : A2014-1319814**

Amount of Each Receipt this Period

18.05

Full Name (Last, First, Middle Initial)

**C. LEE L McElroy**

Mailing Address 7808 ROYAL SYDNEY DR

City State Zip Code  
 GAINESVILLE VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.62

Date of Receipt

MM / DD / YYYY  
 06 / 26 / 2014

**Transaction ID : A2014-1374726**

Amount of Each Receipt this Period

18.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

55.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARK A MCGILLIVRAY**

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.57

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319809**

Amount of Each Receipt this Period

32.65

Full Name (Last, First, Middle Initial)

**B. MARK A MCGILLIVRAY**

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.22

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374721**

Amount of Each Receipt this Period

32.65

Full Name (Last, First, Middle Initial)

**C. EVA M MCINTEE**

Mailing Address 11 Larkspur Drive

City State Zip Code  
 Smithtown NY 11787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.92

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319807**

Amount of Each Receipt this Period

46.35

**SUBTOTAL** of Receipts This Page (optional)..... ►

111.65

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. EVA M MCINTEE**

Mailing Address 11 Larkspur Drive

City State Zip Code  
 Smithtown NY 11787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374719**

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

## **B. JEFFREY J MCRAE**

Mailing Address 83 Arcadia Lane

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PF-Strategy & Plannin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319639**

Amount of Each Receipt this Period

29.05

Full Name (Last, First, Middle Initial)

## **C. JEFFREY J MCRAE**

Mailing Address 83 Arcadia Lane

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PF-Strategy & Plannin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.24

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374551**

Amount of Each Receipt this Period

29.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

104.45

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Jesse E Merten**

Mailing Address 3311 Brook Rd.

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.42

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319848**

Amount of Each Receipt this Period

69.78

Full Name (Last, First, Middle Initial)

**B. Jesse E Merten**

Mailing Address 3311 Brook Rd.

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

892.20

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374760**

Amount of Each Receipt this Period

69.78

Full Name (Last, First, Middle Initial)

**C. HANS H METZINGER**

Mailing Address 407 E. CLAIRE LANE

City State Zip Code  
PROSPECT HTS IL 60070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.16

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319704**

Amount of Each Receipt this Period

19.16

**SUBTOTAL** of Receipts This Page (optional)..... ►

158.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. HANS H METZINGER**

Mailing Address 407 E. CLAIRE LANE

City State Zip Code  
 PROSPECT HTS IL 60070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.32

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374616**

Amount of Each Receipt this Period

19.16

Full Name (Last, First, Middle Initial)

**B. FREDERICK J MILLER**

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code  
 Huddleston VA 24104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319648**

Amount of Each Receipt this Period

34.77

Full Name (Last, First, Middle Initial)

**C. FREDERICK J MILLER**

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code  
 Huddleston VA 24104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.52

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374560**

Amount of Each Receipt this Period

34.77

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.70

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN M MILLER**

Mailing Address 436 N. Harrison St

City  
ALGONQUIN

State Zip Code  
IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-AF-Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.39

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319752**

Amount of Each Receipt this Period

25.40

Full Name (Last, First, Middle Initial)

**B. STEVEN M MILLER**

Mailing Address 436 N. Harrison St

City  
ALGONQUIN

State Zip Code  
IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-AF-Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.79

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374664**

Amount of Each Receipt this Period

25.40

Full Name (Last, First, Middle Initial)

**C. AMY B MILLS**

Mailing Address 942 Forest Avenue

City  
Deerfield

State Zip Code  
IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.96

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319824**

Amount of Each Receipt this Period

22.21

**SUBTOTAL** of Receipts This Page (optional)..... ►

73.01

**TOTAL** This Period (last page this line number only)..... ►

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Use separate schedule(s)  
for each category of the  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. AMY B MILLS**

Mailing Address 942 Forest Avenue

City State Zip Code  
Deerfield IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.17

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374736**

Amount of Each Receipt this Period

22.21

Full Name (Last, First, Middle Initial)

**B. JAMES R MOSELEY III III**

Mailing Address 1709 Montclair Blvd

City State Zip Code  
Brentwood TN 37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.31

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319628**

Amount of Each Receipt this Period

17.16

Full Name (Last, First, Middle Initial)

**C. JAMES R MOSELEY III III**

Mailing Address 1709 Montclair Blvd

City State Zip Code  
Brentwood TN 37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.47

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374540**

Amount of Each Receipt this Period

17.16

**SUBTOTAL** of Receipts This Page (optional)..... ►

56.53

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MEGHAN O MULVIHILL**

Mailing Address 2445 CHERRY LANE

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

State Filings Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.09

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319619**

Amount of Each Receipt this Period

40.45

Full Name (Last, First, Middle Initial)

**B. MEGHAN O MULVIHILL**

Mailing Address 2445 CHERRY LANE

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

State Filings Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.54

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374531**

Amount of Each Receipt this Period

40.45

Full Name (Last, First, Middle Initial)

**C. MICHAEL F MULVIHILL**

Mailing Address 2445 CHERRY LANE

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.59

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319667**

Amount of Each Receipt this Period

44.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

125.77

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL F MULVIHILL**

Mailing Address 2445 CHERRY LANE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.46

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374579**

Amount of Each Receipt this Period

44.87

Full Name (Last, First, Middle Initial)

**B. MICHAEL A MURPHY**

Mailing Address 1908 N. Silver Lake Road

City  
Arlington Heights

State Zip Code  
IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.60

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319789**

Amount of Each Receipt this Period

42.62

Full Name (Last, First, Middle Initial)

**C. MICHAEL A MURPHY**

Mailing Address 1908 N. Silver Lake Road

City  
Arlington Heights

State Zip Code  
IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.22

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374701**

Amount of Each Receipt this Period

42.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DAVID G NADIG**

Mailing Address 2950 LAKE PLACID

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

794.75

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319743**

Amount of Each Receipt this Period

66.72

Full Name (Last, First, Middle Initial)

## **B. DAVID G NADIG**

Mailing Address 2950 LAKE PLACID

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

861.47

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374655**

Amount of Each Receipt this Period

66.72

Full Name (Last, First, Middle Initial)

## **C. PATRICK K NOLL**

Mailing Address 22451 THORNBURY CT

City  
DEER PARK

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.74

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319791**

Amount of Each Receipt this Period

64.04

**SUBTOTAL** of Receipts This Page (optional)..... ►

197.48

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. PATRICK K NOLL**

Mailing Address 22451 THORNBURY CT

City  
DEER PARK

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.78

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374703**

Amount of Each Receipt this Period

64.04

Full Name (Last, First, Middle Initial)

## **B. RICHARD C O'BRIEN**

Mailing Address 574 S. COUNTRY RIDGE

City  
LAKE ZURICH

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.83

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319652**

Amount of Each Receipt this Period

22.03

Full Name (Last, First, Middle Initial)

## **C. RICHARD C O'BRIEN**

Mailing Address 574 S. COUNTRY RIDGE

City  
LAKE ZURICH

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.86

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374564**

Amount of Each Receipt this Period

22.03

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN O'MALLEY**

Mailing Address 1816 ASPEN LANE

City State Zip Code  
MOUNT PROSPECT IL 60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company HR-Retirement-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.51

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319721**

Amount of Each Receipt this Period

17.42

Full Name (Last, First, Middle Initial)

**B. JOHN O'MALLEY**

Mailing Address 1816 ASPEN LANE

City State Zip Code  
MOUNT PROSPECT IL 60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company HR-Retirement-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.93

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374633**

Amount of Each Receipt this Period

17.42

Full Name (Last, First, Middle Initial)

**C. MICHAEL P O'SHEA**

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.89

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319592**

Amount of Each Receipt this Period

27.77

**SUBTOTAL** of Receipts This Page (optional)..... ►

62.61

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL P O'SHEA**

Mailing Address 2505 NEWPORT DRIVE

City  
NAPERVILLE

State Zip Code  
IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.66

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374505**

Amount of Each Receipt this Period

27.77

Full Name (Last, First, Middle Initial)

**B. MICHAEL C OCONNOR**

Mailing Address 1231 Isabella Street

City  
Evanston

State Zip Code  
IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.04

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374581**

Amount of Each Receipt this Period

15.91

Full Name (Last, First, Middle Initial)

**C. ROGER D ODLE II**

Mailing Address 5170 BARCROFT DRIVE

City  
HOFFMAN ESTATES

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.60

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319719**

Amount of Each Receipt this Period

49.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

93.30

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. ROGER D ODLE II**

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code  
HOFFMAN ESTATES IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.22

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374631**

Amount of Each Receipt this Period

49.62

Full Name (Last, First, Middle Initial)

## **B. KENNETH I OMURA**

Mailing Address 361 KELBURN RD. #315

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.29

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319643**

Amount of Each Receipt this Period

41.53

Full Name (Last, First, Middle Initial)

## **C. KENNETH I OMURA**

Mailing Address 361 KELBURN RD. #315

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.82

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374555**

Amount of Each Receipt this Period

41.53

**SUBTOTAL** of Receipts This Page (optional)..... ►

132.68

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAMELA J OVERTON**

Mailing Address 23475 W. Newhaven Dr.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.57

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319637**

Amount of Each Receipt this Period

51.03

Full Name (Last, First, Middle Initial)

**B. PAMELA J OVERTON**

Mailing Address 23475 W. Newhaven Dr.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.60

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374549**

Amount of Each Receipt this Period

51.03

Full Name (Last, First, Middle Initial)

**C. LAURIE PELLOUCHOUD**

Mailing Address 1447 PLEASANT

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.35

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319738**

Amount of Each Receipt this Period

46.28

**SUBTOTAL** of Receipts This Page (optional)..... ►

148.34

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LAURIE PELLOUCHOUD**

Mailing Address 1447 PLEASANT

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.63

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374650**

Amount of Each Receipt this Period

46.28

Full Name (Last, First, Middle Initial)

## **B. Opal G Perry**

Mailing Address 1406 Rosalie St.

City  
Evanston

State Zip Code  
IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ATO-Testing & Release

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.85

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319853**

Amount of Each Receipt this Period

47.42

Full Name (Last, First, Middle Initial)

## **c. Opal G Perry**

Mailing Address 1406 Rosalie St.

City  
Evanston

State Zip Code  
IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ATO-Testing & Release

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.27

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374765**

Amount of Each Receipt this Period

47.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

141.12

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS S PETERSON**

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319827**

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

**B. THOMAS S PETERSON**

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.64

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374739**

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

**C. STEVEN A PETTI**

Mailing Address 580 SALCEDA DR

City State Zip Code  
MUNDELEIN IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.74

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319586**

Amount of Each Receipt this Period

55.82

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

127.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. STEVEN A PETTI**

Mailing Address 580 SALCEDA DR

City State Zip Code  
MUNDELEIN IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.56

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374499**

Amount of Each Receipt this Period

55.82

Full Name (Last, First, Middle Initial)

## **B. JOHN C PINTOZZI**

Mailing Address 2114 W Cortland ST

City State Zip Code  
CHICAGO IL 60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.59

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319657**

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

## **C. JOHN C PINTOZZI**

Mailing Address 2114 W Cortland ST

City State Zip Code  
CHICAGO IL 60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.43

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374569**

Amount of Each Receipt this Period

41.84

**SUBTOTAL** of Receipts This Page (optional)..... ►

139.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID J PRENDERGAST**

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

991.74

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319581**

Amount of Each Receipt this Period

83.08

Full Name (Last, First, Middle Initial)

**B. DAVID J PRENDERGAST**

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1074.82

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374494**

Amount of Each Receipt this Period

83.08

Full Name (Last, First, Middle Initial)

**C. THOMAS G PURTELL**

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.71

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319740**

Amount of Each Receipt this Period

27.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

193.47

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS G PURTELL**

Mailing Address 22663 CHESHIRE COURT

City  
DEER PARK

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.02

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : A2014-1374652**

Amount of Each Receipt this Period

27.31

Full Name (Last, First, Middle Initial)

**B. MARY J QUINN**

Mailing Address 837 S. CHESTNUT AVENUE

City  
ARLINGTON HEIGH

State Zip Code  
IL 60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.09

Date of Receipt

MM / DD / YYYY  
06 / 13 / 2014

**Transaction ID : A2014-1319764**

Amount of Each Receipt this Period

48.00

Full Name (Last, First, Middle Initial)

**C. MARY J QUINN**

Mailing Address 837 S. CHESTNUT AVENUE

City  
ARLINGTON HEIGH

State Zip Code  
IL 60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.09

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : A2014-1374676**

Amount of Each Receipt this Period

48.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

123.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KEVIN P RICE**

Mailing Address 618 Burdick St.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.19

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319687**

Amount of Each Receipt this Period

42.16

Full Name (Last, First, Middle Initial)

## **B. KEVIN P RICE**

Mailing Address 618 Burdick St.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.35

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374599**

Amount of Each Receipt this Period

42.16

Full Name (Last, First, Middle Initial)

## **C. MARIO RIZZO**

Mailing Address 5926 W. 90TH PLACE

City  
OAK LAWN

State Zip Code  
IL 60453

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.07

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319689**

Amount of Each Receipt this Period

61.67

**SUBTOTAL** of Receipts This Page (optional)..... ►

145.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MARIO RIZZO**

Mailing Address 5926 W. 90TH PLACE

City State Zip Code  
OAK LAWN IL 60453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

789.74

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374601**

Amount of Each Receipt this Period

61.67

Full Name (Last, First, Middle Initial)

## **B. ROGER S ROBINSON**

Mailing Address 535 6th Street North

City State Zip Code  
St. Petersburg FL 33701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.80

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319632**

Amount of Each Receipt this Period

26.88

Full Name (Last, First, Middle Initial)

## **C. ROGER S ROBINSON**

Mailing Address 535 6th Street North

City State Zip Code  
St. Petersburg FL 33701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.68

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374544**

Amount of Each Receipt this Period

26.88

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

115.43

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY C ROHLFING**

Mailing Address 106 ASHLAND

City

RIVER FOREST

State

IL

Zip Code

60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.70

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319655**

Amount of Each Receipt this Period

45.31

Full Name (Last, First, Middle Initial)

**B. GREGORY C ROHLFING**

Mailing Address 106 ASHLAND

City

RIVER FOREST

State

IL

Zip Code

60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.01

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374567**

Amount of Each Receipt this Period

45.31

Full Name (Last, First, Middle Initial)

**C. ANDREW R ROMERO**

Mailing Address 3151 Montrose Way

City

El Dorado Hills

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.84

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319806**

Amount of Each Receipt this Period

19.74

**SUBTOTAL** of Receipts This Page (optional)..... ►

110.36

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANDREW R ROMERO**

Mailing Address 3151 Montrose Way

City State Zip Code  
El Dorado Hills CA 95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.58

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374718**

Amount of Each Receipt this Period

19.74

Full Name (Last, First, Middle Initial)

**B. JOHN ROSZKOWSKI**

Mailing Address 3371 VENARD RD.

City State Zip Code  
DOWNERS GROVE IL 60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.03

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319718**

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

**C. JOHN ROSZKOWSKI**

Mailing Address 3371 VENARD RD.

City State Zip Code  
DOWNERS GROVE IL 60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374630**

Amount of Each Receipt this Period

43.97

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

107.68



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CASSANDRA C RUSSELL**

Mailing Address 37194 N Dillon Ct

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.40

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319779**

Amount of Each Receipt this Period

17.19

Full Name (Last, First, Middle Initial)

**B. CASSANDRA C RUSSELL**

Mailing Address 37194 N Dillon Ct

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.59

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374691**

Amount of Each Receipt this Period

17.19

Full Name (Last, First, Middle Initial)

**C. PAUL R RYSKE**

Mailing Address 898 LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.10

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319653**

Amount of Each Receipt this Period

45.86

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.24

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. PAUL R RYSKE**

Mailing Address 898 LONGWOOD DR.

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.96

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374565**

Amount of Each Receipt this Period

45.86

Full Name (Last, First, Middle Initial)

## **B. Donald D Sands**

Mailing Address 321 North Brainard Avenue

City State Zip Code  
Lagrange Park IL 60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ST-Protection Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

674.99

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319840**

Amount of Each Receipt this Period

56.77

Full Name (Last, First, Middle Initial)

## **C. Donald D Sands**

Mailing Address 321 North Brainard Avenue

City State Zip Code  
Lagrange Park IL 60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ST-Protection Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.76

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374752**

Amount of Each Receipt this Period

56.77

**SUBTOTAL** of Receipts This Page (optional)..... ►

159.40

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. PATRICK J SARB**

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code  
 LISLE IL 60532

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.01

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A2014-1374669

Amount of Each Receipt this Period

15.80

Full Name (Last, First, Middle Initial)

**B. KAREN M SCHECHT**

Mailing Address 754 Pinellas Bayway S

City State Zip Code  
 Tierra Verde FL 33715

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim-Sr Claim Field Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A2014-1374602

Amount of Each Receipt this Period

16.61

Full Name (Last, First, Middle Initial)

**C. PATRICK J SCHNEIDER**

Mailing Address 210 NORTH TRAIL

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.73

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 13 2014

Transaction ID : A2014-1319722

Amount of Each Receipt this Period

37.64

SUBTOTAL of Receipts This Page (optional)..... ►

70.05

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICK J SCHNEIDER**

Mailing Address 210 NORTH TRAIL

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374634**

Amount of Each Receipt this Period

37.64

Full Name (Last, First, Middle Initial)

**B. STEPHEN E SCHOLL**

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319605**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. STEPHEN E SCHOLL**

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374518**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

157.64

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DALE J SCHUELLER**

Mailing Address 25 Scarlet Oak Rd

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.67

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319795**

Amount of Each Receipt this Period

22.09

Full Name (Last, First, Middle Initial)

**B. DALE J SCHUELLER**

Mailing Address 25 Scarlet Oak Rd

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.76

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374707**

Amount of Each Receipt this Period

22.09

Full Name (Last, First, Middle Initial)

**C. Shayna M Schulz**

Mailing Address 1523 Sheridan Road

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Customer Contact C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.69

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374753**

Amount of Each Receipt this Period

16.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.77

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL SCHUTT**

Mailing Address 6323 N. NORMANDY

City State Zip Code  
 CHICAGO IL 60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-INV-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319688**

Amount of Each Receipt this Period

56.37

Full Name (Last, First, Middle Initial)

**B. PAUL SCHUTT**

Mailing Address 6323 N. NORMANDY

City State Zip Code  
 CHICAGO IL 60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-INV-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.05

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374600**

Amount of Each Receipt this Period

56.37

Full Name (Last, First, Middle Initial)

**C. DAVID J SCHWARTZER**

Mailing Address 128 Waverly Circle

City State Zip Code  
 Phoenixville PA 19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319771**

Amount of Each Receipt this Period

54.82

**SUBTOTAL** of Receipts This Page (optional)..... ►

167.56

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID J SCHWARTZER**

Mailing Address 128 Waverly Circle

City State Zip Code  
 Phoenixville PA 19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.37

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374683**

Amount of Each Receipt this Period

54.82

Full Name (Last, First, Middle Initial)

**B. ALBERT SCHWARZHAUPT**

Mailing Address 29 Doral Drive

City State Zip Code  
 Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.40

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319590**

Amount of Each Receipt this Period

18.15

Full Name (Last, First, Middle Initial)

**C. ALBERT SCHWARZHAUPT**

Mailing Address 29 Doral Drive

City State Zip Code  
 Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.55

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374503**

Amount of Each Receipt this Period

18.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

91.12

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STACY Y SHARPE**

Mailing Address 616 E Street NW #649

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.34

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319714**

Amount of Each Receipt this Period

55.73

Full Name (Last, First, Middle Initial)

**B. STACY Y SHARPE**

Mailing Address 616 E Street NW #649

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.07

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374626**

Amount of Each Receipt this Period

55.73

Full Name (Last, First, Middle Initial)

**C. STEVEN E SHEBIK**

Mailing Address 517 ROBINWOOD LANE

City State Zip Code  
WHEATON IL 60189

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SMT-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1713.42

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319694**

Amount of Each Receipt this Period

145.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

256.84

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. STEVEN E SHEBIK**

Mailing Address 517 ROBINWOOD LANE

City  
WHEATON

State  
IL

Zip Code  
60189

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SMT-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1858.80

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374606**

Amount of Each Receipt this Period

145.38

Full Name (Last, First, Middle Initial)

## **B. STEVEN R SHEFFEY**

Mailing Address 839 SUMAC

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.47

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319650**

Amount of Each Receipt this Period

21.95

Full Name (Last, First, Middle Initial)

## **C. STEVEN R SHEFFEY**

Mailing Address 839 SUMAC

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.42

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374562**

Amount of Each Receipt this Period

21.95

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

189.28

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ADAM R SHORES**

Mailing Address 680 Brookstone Road

City  
Grayslake

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.87

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319823**

Amount of Each Receipt this Period

28.83

Full Name (Last, First, Middle Initial)

**B. ADAM R SHORES**

Mailing Address 680 Brookstone Road

City  
Grayslake

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.70

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374735**

Amount of Each Receipt this Period

28.83

Full Name (Last, First, Middle Initial)

**C. DENIS C SHUNTA**

Mailing Address 5200 RIDGEGATE WAY

City  
FAIR OAKS

State Zip Code  
CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Field Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.12

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319754**

Amount of Each Receipt this Period

24.19

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.85

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DENIS C SHUNTA**

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code  
 FAIR OAKS CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Field Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.31

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374666**

Amount of Each Receipt this Period

24.19

Full Name (Last, First, Middle Initial)

## **B. ROBERT L SIMMONS**

Mailing Address 1146 39th Ave NE

City State Zip Code  
 St Petersburg FL 33703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.12

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319598**

Amount of Each Receipt this Period

36.36

Full Name (Last, First, Middle Initial)

## **C. ROBERT L SIMMONS**

Mailing Address 1146 39th Ave NE

City State Zip Code  
 St Petersburg FL 33703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374511**

Amount of Each Receipt this Period

36.36

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

96.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KIMBALL S SIMON**

Mailing Address 11 WEHRHEIM

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.31

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319803**

Amount of Each Receipt this Period

42.67

Full Name (Last, First, Middle Initial)

**B. KIMBALL S SIMON**

Mailing Address 11 WEHRHEIM

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.98

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374715**

Amount of Each Receipt this Period

42.67

Full Name (Last, First, Middle Initial)

**C. KIMBERLY J SLOANE**

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.87

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319709**

Amount of Each Receipt this Period

31.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

116.67

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KIMBERLY J SLOANE**

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374621**

Amount of Each Receipt this Period

31.33

Full Name (Last, First, Middle Initial)

**B. ANN M SMITH**

Mailing Address 16801 Carmichael Place

City

Purcellville

State

VA

Zip Code

20132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Administrative Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.72

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374482**

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

**C. CHARLES M SMITH**

Mailing Address 414 E. Burr Oak Dr.

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.83

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319774**

Amount of Each Receipt this Period

38.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

85.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CHARLES M SMITH**

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code  
 Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.42

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374686**

Amount of Each Receipt this Period

38.59

Full Name (Last, First, Middle Initial)

**B. KATHERINE A SMITH**

Mailing Address 231 KAINER AVENUE

City State Zip Code  
 BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.25

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319695**

Amount of Each Receipt this Period

19.06

Full Name (Last, First, Middle Initial)

**C. KATHERINE A SMITH**

Mailing Address 231 KAINER AVENUE

City State Zip Code  
 BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.31

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374607**

Amount of Each Receipt this Period

19.06

**SUBTOTAL** of Receipts This Page (optional)..... ►

76.71

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KENNETH D SMITH**

Mailing Address 619 N HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.40

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319716**

Amount of Each Receipt this Period

17.20

Full Name (Last, First, Middle Initial)

**B. KENNETH D SMITH**

Mailing Address 619 N HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.60

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374628**

Amount of Each Receipt this Period

17.20

Full Name (Last, First, Middle Initial)

**C. RICHARD J SMITH Jr.**

Mailing Address 597 TREETOP LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.82

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319781**

Amount of Each Receipt this Period

24.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

58.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD J SMITH Jr.**

Mailing Address 597 TREETOP LANE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.07

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374693**

Amount of Each Receipt this Period

24.25

Full Name (Last, First, Middle Initial)

**B. STEVEN P SORENSON**

Mailing Address 20712 High Ridge Dr

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319766**

Amount of Each Receipt this Period

94.62

Full Name (Last, First, Middle Initial)

**C. STEVEN P SORENSON**

Mailing Address 20712 High Ridge Dr

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374678**

Amount of Each Receipt this Period

94.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

213.49

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KEVIN A SPATARO**

Mailing Address 1663 SARATOGA LANE

City  
GLENVIEW

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.16

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319735**

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

## **B. KEVIN A SPATARO**

Mailing Address 1663 SARATOGA LANE

City  
GLENVIEW

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.18

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374647**

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

## **C. BRIAN M SPENCE**

Mailing Address 1001 N Vermont St

City  
Arlington

State Zip Code  
VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field PF-Fin Analysis-Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.53

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319751**

Amount of Each Receipt this Period

30.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

110.65

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BRIAN M SPENCE**

Mailing Address 1001 N Vermont St

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field PF-Fin Analysis-Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.14

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374663**

Amount of Each Receipt this Period

30.61

Full Name (Last, First, Middle Initial)

## **B. MARY SPRINGBERG**

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.75

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319646**

Amount of Each Receipt this Period

61.69

Full Name (Last, First, Middle Initial)

## **C. MARY SPRINGBERG**

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.44

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374558**

Amount of Each Receipt this Period

61.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

153.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. GARY S STERE**

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code  
 ATLANTIC BEACH FL 32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.77

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319634**

Amount of Each Receipt this Period

44.64

Full Name (Last, First, Middle Initial)

## **B. GARY S STERE**

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code  
 ATLANTIC BEACH FL 32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.41

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374546**

Amount of Each Receipt this Period

44.64

Full Name (Last, First, Middle Initial)

## **C. MYRON E STOUFFER**

Mailing Address 324 W. Cook

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Independent Chann

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.66

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319630**

Amount of Each Receipt this Period

32.02

**SUBTOTAL** of Receipts This Page (optional)..... ►

121.30

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MYRON E STOUFFER**

Mailing Address 324 W. Cook

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Independent Chann

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374542**

Amount of Each Receipt this Period

32.02

Full Name (Last, First, Middle Initial)

## **B. KATHLEEN A SWAIN**

Mailing Address 242 HIGHVIEW

City State Zip Code  
 ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

766.81

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319659**

Amount of Each Receipt this Period

64.49

Full Name (Last, First, Middle Initial)

## **C. KATHLEEN A SWAIN**

Mailing Address 242 HIGHVIEW

City State Zip Code  
 ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.30

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374571**

Amount of Each Receipt this Period

64.49

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

161.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CARL J TACKETT**

Mailing Address 307 WENDRON COURT

City  
FRANKLIN

State Zip Code  
TN 37069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.52

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319666**

Amount of Each Receipt this Period

20.61

Full Name (Last, First, Middle Initial)

**B. CARL J TACKETT**

Mailing Address 307 WENDRON COURT

City  
FRANKLIN

State Zip Code  
TN 37069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.13

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374578**

Amount of Each Receipt this Period

20.61

Full Name (Last, First, Middle Initial)

**C. SEAN D THAKUR**

Mailing Address 701 N. Chruch St #1

City  
Charlotte

State Zip Code  
NC 28202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.86

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319784**

Amount of Each Receipt this Period

19.99

**SUBTOTAL** of Receipts This Page (optional)..... ►

61.21

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SEAN D THAKUR**

Mailing Address 701 N. Chruch St #1

City State Zip Code  
 Charlotte NC 28202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374696**

Amount of Each Receipt this Period

19.99

Full Name (Last, First, Middle Initial)

**B. MICHAEL A THOMAS**

Mailing Address 152 Robsart Place

City State Zip Code  
 KENILWORTH IL 60043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319826**

Amount of Each Receipt this Period

25.96

Full Name (Last, First, Middle Initial)

**C. MICHAEL A THOMAS**

Mailing Address 152 Robsart Place

City State Zip Code  
 KENILWORTH IL 60043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374738**

Amount of Each Receipt this Period

25.96

**SUBTOTAL** of Receipts This Page (optional)..... ►

71.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GERALYN A THOMPSON**

Mailing Address 6906 S. BENNETT

City  
CHICAGO

State Zip Code  
IL 60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.41

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319682**

Amount of Each Receipt this Period

34.11

Full Name (Last, First, Middle Initial)

**B. GERALYN A THOMPSON**

Mailing Address 6906 S. BENNETT

City  
CHICAGO

State Zip Code  
IL 60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.52

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374594**

Amount of Each Receipt this Period

34.11

Full Name (Last, First, Middle Initial)

**C. MARK L THOMPSON**

Mailing Address 3233 N RACINE #2

City  
CHICAGO

State Zip Code  
IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Encompass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.21

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319796**

Amount of Each Receipt this Period

49.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

117.84

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARK L THOMPSON**

Mailing Address 3233 N RACINE #2

City  
CHICAGO

State Zip Code  
IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Encompass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.18

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374708**

Amount of Each Receipt this Period

45.97

Full Name (Last, First, Middle Initial)

**B. WILLIAM J THOMPSON**

Mailing Address 5129 Pine River Trail

City  
Castle Rock

State Zip Code  
CO 80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.73

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319627**

Amount of Each Receipt this Period

52.09

Full Name (Last, First, Middle Initial)

**C. WILLIAM J THOMPSON**

Mailing Address 5129 Pine River Trail

City  
Castle Rock

State Zip Code  
CO 80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.82

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374539**

Amount of Each Receipt this Period

52.09

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.15

**TOTAL** This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MELINDA S TUNNER**

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code  
LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-SAL-Sales Programs

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.37

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319780**

Amount of Each Receipt this Period

55.61

Full Name (Last, First, Middle Initial)

**B. MELINDA S TUNNER**

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code  
LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-SAL-Sales Programs

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

717.98

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374692**

Amount of Each Receipt this Period

55.61

Full Name (Last, First, Middle Initial)

**C. RICHARD D TURANO**

Mailing Address 4960 S CHESTER ST

City State Zip Code  
ENGLEWOOD CO 80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company Corporate Counsel

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.10

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319585**

Amount of Each Receipt this Period

22.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

133.68

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD D TURANO**

Mailing Address 4960 S CHESTER ST

City  
ENGLEWOOD

State Zip Code  
CO 80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374498**

Amount of Each Receipt this Period

22.46

Full Name (Last, First, Middle Initial)

**B. SHAUNDRA L TURNER**

Mailing Address 7660 Stony Creek Lane

City  
Ellicott City

State Zip Code  
MD 21043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.50

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319570**

Amount of Each Receipt this Period

26.58

Full Name (Last, First, Middle Initial)

**C. SHAUNDRA L TURNER**

Mailing Address 7660 Stony Creek Lane

City  
Ellicott City

State Zip Code  
MD 21043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.08

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374483**

Amount of Each Receipt this Period

26.58

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.62

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM A VAINISI**

Mailing Address 636 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

774.84

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319691**

Amount of Each Receipt this Period

64.93

Full Name (Last, First, Middle Initial)

**B. WILLIAM A VAINISI**

Mailing Address 636 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.77

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374603**

Amount of Each Receipt this Period

64.93

Full Name (Last, First, Middle Initial)

**C. LISA A VAN SCOYOC**

Mailing Address 555 PRIMROSE LANE

City  
CRYSTAL LAKE

State Zip Code  
IL 60014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.79

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319699**

Amount of Each Receipt this Period

17.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

147.47

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA A VAN SCOYOC**

Mailing Address 555 PRIMROSE LANE

City State Zip Code  
 CRYSTAL LAKE IL 60014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.40

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374611**

Amount of Each Receipt this Period

17.61

Full Name (Last, First, Middle Initial)

## **B. PATRICIA C VANLAMMEREN**

Mailing Address 2800 Birchwood Avenue

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Field Business Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.14

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319802**

Amount of Each Receipt this Period

71.79

Full Name (Last, First, Middle Initial)

## **C. PATRICIA C VANLAMMEREN**

Mailing Address 2800 Birchwood Avenue

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Field Business Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

926.93

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374714**

Amount of Each Receipt this Period

71.79

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

161.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD VAVRA**

Mailing Address 2514 S WESLEY AVENUE

City  
BERWYN

State Zip Code  
IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.10

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319654**

Amount of Each Receipt this Period

44.88

Full Name (Last, First, Middle Initial)

**B. RICHARD VAVRA**

Mailing Address 2514 S WESLEY AVENUE

City  
BERWYN

State Zip Code  
IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.98

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374566**

Amount of Each Receipt this Period

44.88

Full Name (Last, First, Middle Initial)

**C. STEVEN C VERNEY**

Mailing Address 37144 FOX HILL DR

City  
WADSWORTH

State Zip Code  
IL 60083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1727.84

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319594**

Amount of Each Receipt this Period

146.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

235.91

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN C VERNEY**

Mailing Address 37144 FOX HILL DR

City  
WADSWORTH

State Zip Code  
IL 60083

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1873.99

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374507**

Amount of Each Receipt this Period

146.15

Full Name (Last, First, Middle Initial)

**B. MICHAEL F VITALE JR Jr.**

Mailing Address 1824 Roy Lane

City  
Forks Twp.

State Zip Code  
PA 18040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.97

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319612**

Amount of Each Receipt this Period

17.90

Full Name (Last, First, Middle Initial)

**C. MICHAEL F VITALE JR Jr.**

Mailing Address 1824 Roy Lane

City  
Forks Twp.

State Zip Code  
PA 18040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.87

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374525**

Amount of Each Receipt this Period

17.90

**SUBTOTAL** of Receipts This Page (optional)..... ►

181.95

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EDWIN L WASINGER JR Jr.**

Mailing Address 6245 MURIFIELD DRIVE

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.68

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319739**

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**B. EDWIN L WASINGER JR Jr.**

Mailing Address 6245 MURIFIELD DRIVE

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.52

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374651**

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**C. Robert Wasserman**

Mailing Address 1N165 Partridge Dr

City  
Wheaton

State Zip Code  
IL 60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

859.18

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319838**

Amount of Each Receipt this Period

72.39

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.07

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Robert Wasserman**

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

931.57

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374750**

Amount of Each Receipt this Period

72.39

Full Name (Last, First, Middle Initial)

**B. LEWIS C WEBB II**

Mailing Address 1444 El Pardo Dr

City

Trinity

State

FL

Zip Code

34655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.38

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319821**

Amount of Each Receipt this Period

18.06

Full Name (Last, First, Middle Initial)

**C. LEWIS C WEBB II**

Mailing Address 1444 El Pardo Dr

City

Trinity

State

FL

Zip Code

34655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.44

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374733**

Amount of Each Receipt this Period

18.06

**SUBTOTAL** of Receipts This Page (optional)..... ►

108.51

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SAMUEL W WHITEMAN**

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.98

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319787**

Amount of Each Receipt this Period

37.34

Full Name (Last, First, Middle Initial)

**B. SAMUEL W WHITEMAN**

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.32

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374699**

Amount of Each Receipt this Period

37.34

Full Name (Last, First, Middle Initial)

**C. CYNTHIA A WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City

Franklin

State

TN

Zip Code

37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.35

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319597**

Amount of Each Receipt this Period

25.56

**SUBTOTAL** of Receipts This Page (optional)..... ►

100.24

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CYNTHIA A WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.91

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374510**

Amount of Each Receipt this Period

25.56

Full Name (Last, First, Middle Initial)

**B. ROBERT N WHOLF**

Mailing Address 115 B Mohawk Trail

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Emerging Business Operati

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.57

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319645**

Amount of Each Receipt this Period

24.06

Full Name (Last, First, Middle Initial)

**C. ROBERT N WHOLF**

Mailing Address 115 B Mohawk Trail

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Emerging Business Operati

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.63

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374557**

Amount of Each Receipt this Period

24.06

**SUBTOTAL** of Receipts This Page (optional)..... ►

73.68

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN K WILCOX**

Mailing Address 1120 JESSICA LANE

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.13

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319668**

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

**B. JOHN K WILCOX**

Mailing Address 1120 JESSICA LANE

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.48

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374580**

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

**C. JAMES L WILLCOX**

Mailing Address 1562 Sienna Oak Court

City  
Sandy

State Zip Code  
UT 84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.86

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319629**

Amount of Each Receipt this Period

28.89

**SUBTOTAL** of Receipts This Page (optional)..... ►

121.59

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES L WILLCOX**

Mailing Address 1562 Sienna Oak Court

City State Zip Code  
 Sandy UT 84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.75

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374541**

Amount of Each Receipt this Period

28.89

Full Name (Last, First, Middle Initial)

**B. JEFFREY W WILLIAMS**

Mailing Address 7104 CHARDON COURT

City State Zip Code  
 CLARKSVILLE MD 21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.95

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319683**

Amount of Each Receipt this Period

45.75

Full Name (Last, First, Middle Initial)

**C. JEFFREY W WILLIAMS**

Mailing Address 7104 CHARDON COURT

City State Zip Code  
 CLARKSVILLE MD 21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.70

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374595**

Amount of Each Receipt this Period

45.75

**SUBTOTAL** of Receipts This Page (optional)..... ►

120.39

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS J WILSON**

Mailing Address 2024 N. MOHAWK

City  
CHICAGO

State Zip Code  
IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3132.68

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319761**

Amount of Each Receipt this Period

265.38

Full Name (Last, First, Middle Initial)

**B. THOMAS J WILSON**

Mailing Address 2024 N. MOHAWK

City  
CHICAGO

State Zip Code  
IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3398.06

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374673**

Amount of Each Receipt this Period

265.38

Full Name (Last, First, Middle Initial)

**C. KURT L WINTER**

Mailing Address 1403 N. WALNUT

City  
ARLINGTON HGHTS

State Zip Code  
IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.82

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319822**

Amount of Each Receipt this Period

22.56

**SUBTOTAL** of Receipts This Page (optional)..... ►

553.32

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KURT L WINTER**

Mailing Address 1403 N. WALNUT

City State Zip Code  
 ARLINGTON HGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company VP-MRK-Regional Marketing

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 288.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374734**

Amount of Each Receipt this Period

22.56

Full Name (Last, First, Middle Initial)

**B. Matthew E Winter**

Mailing Address 70 Ferncliff Drive

City State Zip Code  
 West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company EVP-PC-Pres Auto Home &

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 2111.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319842**

Amount of Each Receipt this Period

177.69

Full Name (Last, First, Middle Initial)

**C. Matthew E Winter**

Mailing Address 70 Ferncliff Drive

City State Zip Code  
 West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company EVP-PC-Pres Auto Home &

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 2289.22

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374754**

Amount of Each Receipt this Period

177.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

377.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RONALD W WINTER**

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.37

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319734**

Amount of Each Receipt this Period

21.43

Full Name (Last, First, Middle Initial)

**B. RONALD W WINTER**

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.80

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374646**

Amount of Each Receipt this Period

21.43

Full Name (Last, First, Middle Initial)

**C. BRUCE A WOIKE**

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.38

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319731**

Amount of Each Receipt this Period

22.95

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.81

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BRUCE A WOIKE**

Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code  
ARLINGTON HTS. IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.33

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374643**

Amount of Each Receipt this Period

22.95

Full Name (Last, First, Middle Initial)

## **B. ANGELA K WOIROL**

Mailing Address 28616 Sky Crest Dr

City State Zip Code  
Ivanhoe IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.07

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319788**

Amount of Each Receipt this Period

41.99

Full Name (Last, First, Middle Initial)

## **C. ANGELA K WOIROL**

Mailing Address 28616 Sky Crest Dr

City State Zip Code  
Ivanhoe IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.06

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374700**

Amount of Each Receipt this Period

41.99

**SUBTOTAL** of Receipts This Page (optional)..... ►

106.93

**TOTAL** This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MATTHEW WOJTASZEK**

Mailing Address 7 WELLESLEY COURT

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.04

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319596**

Amount of Each Receipt this Period

17.65

Full Name (Last, First, Middle Initial)

**B. MATTHEW WOJTASZEK**

Mailing Address 7 WELLESLEY COURT

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.69

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374509**

Amount of Each Receipt this Period

17.65

Full Name (Last, First, Middle Initial)

**C. DAVID E WOOLWINE**

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code  
 CHICAGO IL 60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.35

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319621**

Amount of Each Receipt this Period

21.17

**SUBTOTAL** of Receipts This Page (optional)..... ►

56.47

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. DAVID E WOOLWINE**

Mailing Address 1608 W. ROSEHILL DR

 City  
 CHICAGO

 State  
 IL

 Zip Code  
 60660

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A2014-1374533

Amount of Each Receipt this Period

21.17

Full Name (Last, First, Middle Initial)

**B. FLOYD M YAGER**

Mailing Address 1610 BIRCH LANE

 City  
 PARK RIDGE

 State  
 IL

 Zip Code  
 60068

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AP-Chief Data Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2014

Transaction ID : A2014-1319708

Amount of Each Receipt this Period

64.49

Full Name (Last, First, Middle Initial)

**C. FLOYD M YAGER**

Mailing Address 1610 BIRCH LANE

 City  
 PARK RIDGE

 State  
 IL

 Zip Code  
 60068

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AP-Chief Data Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

828.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A2014-1374620

Amount of Each Receipt this Period

64.49

SUBTOTAL of Receipts This Page (optional)..... ►

150.15

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. NOEL C YOUNG**

Mailing Address 10936 E. Butherus Drive

City State Zip Code  
Scottsdale AZ 85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.65

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319778**

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

## **B. NOEL C YOUNG**

Mailing Address 10936 E. Butherus Drive

City State Zip Code  
Scottsdale AZ 85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.25

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374690**

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

## **C. PHILLIP C YOUNG**

Mailing Address 2181 APPLE HILL LANE

City State Zip Code  
BUFFALO GROVE IL 60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.96

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319685**

Amount of Each Receipt this Period

22.12

**SUBTOTAL** of Receipts This Page (optional)..... ►

91.32

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PHILLIP C YOUNG**

Mailing Address 2181 APPLE HILL LANE

City State Zip Code  
 BUFFALO GROVE IL 60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374597**

Amount of Each Receipt this Period

22.12

Full Name (Last, First, Middle Initial)

**B. MARY E ZAGORSKI**

Mailing Address 2609 N PINE AVE

City State Zip Code  
 ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : A2014-1319706**

Amount of Each Receipt this Period

44.26

Full Name (Last, First, Middle Initial)

**C. MARY E ZAGORSKI**

Mailing Address 2609 N PINE AVE

City State Zip Code  
 ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : A2014-1374618**

Amount of Each Receipt this Period

44.26

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.64

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL K ZIGTERMAN**

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code  
 VILLA PARK IL 60181

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.10

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319747**

Amount of Each Receipt this Period

21.45

Full Name (Last, First, Middle Initial)

**B. PAUL K ZIGTERMAN**

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code  
 VILLA PARK IL 60181

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.55

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2014-1374659**

Amount of Each Receipt this Period

21.45

Full Name (Last, First, Middle Initial)

**C. GERALD L ZIMMERMAN JR**

Mailing Address 2584 Sutton Lane

City State Zip Code  
 AURORA IL 60502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.90

Date of Receipt

06 / 13 / 2014

**Transaction ID : A2014-1319770**

Amount of Each Receipt this Period

76.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

118.95

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GERALD L ZIMMERMAN JR**

Mailing Address 2584 Sutton Lane

City  
AURORA

State Zip Code  
IL 60502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.95

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374682**

Amount of Each Receipt this Period

76.05

Full Name (Last, First, Middle Initial)

**B. CARLA A ZUNIGA**

Mailing Address 2189 N. BEAVER CREEK DRIVE

City  
VERNON HILLS

State Zip Code  
IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.45

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : A2014-1319805**

Amount of Each Receipt this Period

49.25

Full Name (Last, First, Middle Initial)

**C. CARLA A ZUNIGA**

Mailing Address 2189 N. BEAVER CREEK DRIVE

City  
VERNON HILLS

State Zip Code  
IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.70

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : A2014-1374717**

Amount of Each Receipt this Period

49.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

174.55

**TOTAL** This Period (last page this line number only)..... ►

18925.85

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 167 OF 174

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Fifth Third Bank**

Mailing Address 346 West Carol Lane

City	State	Zip Code
Elmhurst	IL	60062

Purpose of Disbursement  
Service Charge

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

**Transaction ID : B500162**

Amount of Each Disbursement this Period

106.61
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106.61

106.61

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 174

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Kyrsten Sinema for Congress**

Mailing Address PO Box 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kyrsten Sinema**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 09

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

**Transaction ID : B497660**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. John Carney for Congress**

Mailing Address 410 1st Street SE - Suite 310

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**John Carney**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: DE District: 01

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	09	/	2014

**Transaction ID : B497918**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Freedom Fund**

Mailing Address 25 E Masonic View Avenue

City	State	Zip Code
Alexandria	VA	22301

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼ Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

**Transaction ID : B497659**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 169 OF 174

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Rodney Davis for Congress**

Mailing Address 499 S. Capitol Street SW Ste 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rodney Davis**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 13

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

**Transaction ID : B497657**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Kirk for Senate**

Mailing Address 209 Pennsylvania Ave SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mark Kirk**Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: IL District:

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

**Transaction ID : B497656**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Cheri Bustos**

Mailing Address 3701 Porter Street NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement  
Contribution

011

Candidate Name

**Cheri Bustos**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 17

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	09	/	2014

**Transaction ID : B497919**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Randy Hultgren for Congress**

Mailing Address 104 Hume Avenue

City	State	Zip Code
Alexandria	VA	22301

Purpose of Disbursement  
Contribution

Candidate Name

**Randy Hultgren**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	09	/	2014

**Transaction ID : B497916**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Schneider for Congress**

Mailing Address 3701 Porter Street NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement  
Contribution

Candidate Name

**Brad Schneider**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : B498320**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Shaheen for Senate**

Mailing Address 105 North State Street

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement  
Contribution

Candidate Name

**Jeanne Shaheen**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	30	/	2014

**Transaction ID : B499942**

Amount of Each Disbursement this Period

250.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2750.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 171 OF 174

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Tim Bishop for Congress**

Mailing Address 412 First Street SE Ste 100

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Tim Bishop**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	09	/	2014

**Transaction ID : B497917**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Jim Renacci for Congress**

Mailing Address 1301 K Street NW Suite 1050 East

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Contribution

011

Candidate Name

**James B Renacci**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

**Transaction ID : B497658**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Jim Clyburn**

Mailing Address 499 S. Capitol Street SW Ste 422

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**James E Clyburn**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : B498319**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Allstate Insurance Company PAC



011

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Category/  
Type

Amount of Each Disbursement this Period

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

1000.00

12750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 173 OF 174

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Aumann for Delegate**

Mailing Address 538 Wyngate Road

City	State	Zip Code
Lutherville-Timonium	MD	21093

Purpose of Disbursement  
P-2014 State House 42 MD

011

Candidate Name

**Susan L.M. Aumann**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 42

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

**Transaction ID : B499070**

Amount of Each Disbursement this Period

150.00
--------

Full Name (Last, First, Middle Initial)

**B. Citizens for Delores Kelley**

Mailing Address 17 West Courtland Street Suite 210

City	State	Zip Code
Bel Air	MD	21014

Purpose of Disbursement  
P-2014 State Senate 10 MD

011

Candidate Name

**Delores G Kelley**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

**Transaction ID : B499071**

Amount of Each Disbursement this Period

150.00
--------

Full Name (Last, First, Middle Initial)

**C. Keiffer Mitchel Jr for the 44th**

Mailing Address Post Office Box 22623

City	State	Zip Code
Baltimore	MD	21203

Purpose of Disbursement  
P-2014 State House 44 MD

011

Candidate Name

**Keiffer Mitchel**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 44

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

**Transaction ID : B499072**

Amount of Each Disbursement this Period

150.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 174 OF 174

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MIC PAC**

Mailing Address 220 Madison St.

City

Jefferson City

State

MO

Zip Code

65101

Purpose of Disbursement

State PAC

Candidate Name

011

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For: 2014

☐

Primary

☐

General

☒

Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 09 / 2014**Transaction ID : B497923**

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

1950.00